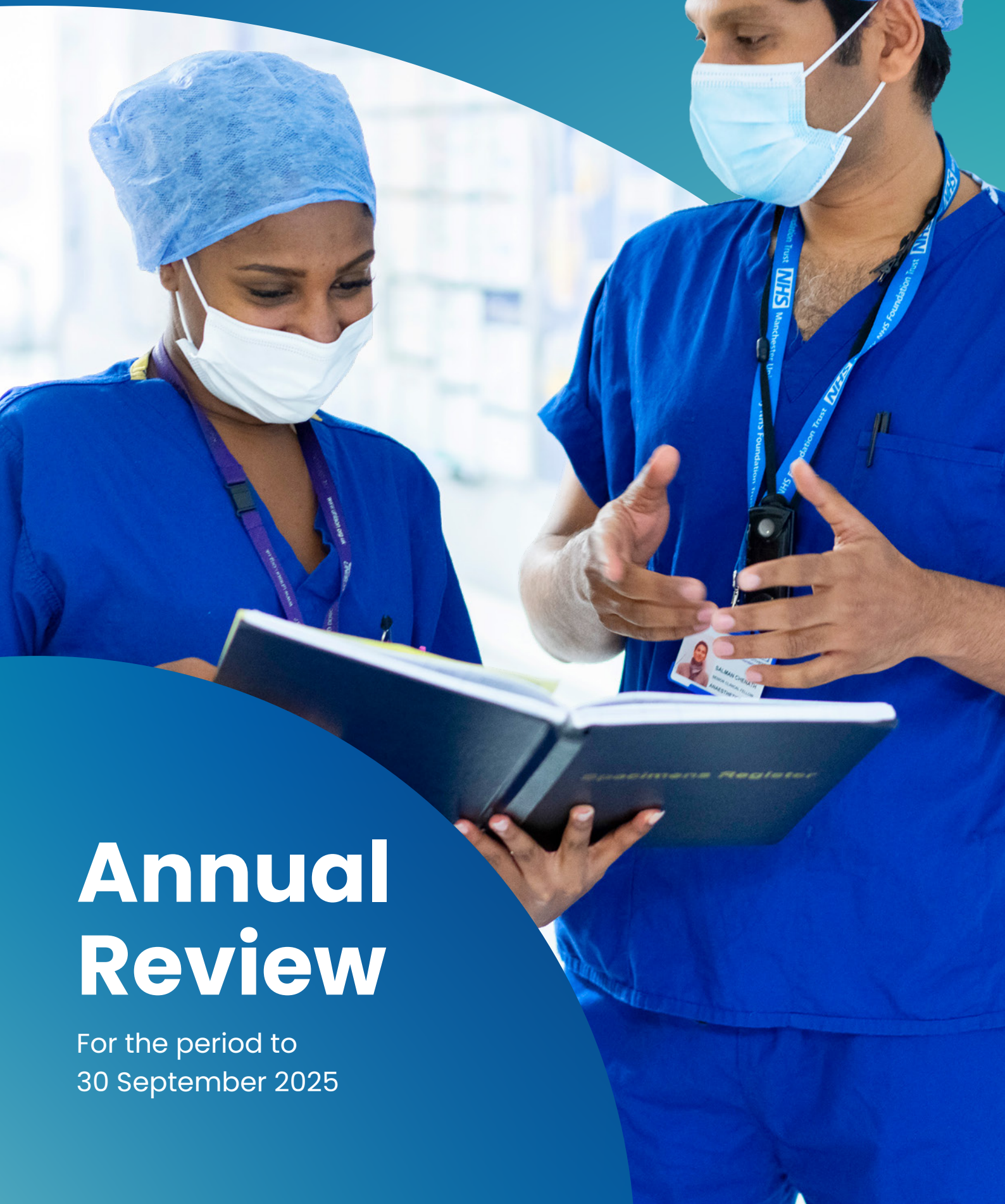




Obstetric  
Anaesthetists'  
Association



# Annual Review

For the period to  
30 September 2025

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# About the Obstetric Anaesthetists' Association (OAA)

The OAA is a specialist membership organisation that provides an authoritative voice on safety in maternity services through leadership, education, information and guidance.

## Our core activities



### Educating

We hold a number of meetings and courses throughout the year for anaesthetists and other health professionals. OAA members enjoy discounted rates and are granted online access to lectures, podcasts and reports.



### Patient information

We run and fund a public information website, **LabourPains**, on obstetric anaesthetic practice, including looking at the pain relief options for labour. Our information is freely available in over 30 languages.



### Global expertise

We provide a voice for obstetric anaesthetists by representing our speciality nationally and internationally, engaging with other healthcare organisations and governmental agencies.



### Best practice

We share guidance on best practice and conduct surveys with our members to better understand how obstetric anaesthesia is delivered.



### Grant giving

We provide grants to members to encourage research into practice and care that will inform and improve future practice.



### Benchmarking

We support our members to measure and compare the quality of care provided in their hospitals so we can better understand how care can be improved locally and nationally.

# Welcome from our President

It is a pleasure to introduce this year's OAA Annual Review.

Obstetric anaesthesia sits at a unique intersection of clinical practice, where urgency and uncertainty meet, where two patients are always at the centre of our decisions, and where small details can have profound consequences. It is also a specialty defined not just by technical skill, but by teamwork, judgement and compassion. The work reflected in this report captures all of those elements.

Over the past year, the OAA has continued to provide a strong and visible voice for obstetric anaesthesia, both within the UK and internationally. Through our education programme, guidance development, research funding and outreach, we remain focused on improving the quality and safety of care for women, people giving birth and their babies.

A particular highlight has been the breadth and energy of our educational activity. The Annual Scientific Meeting in Belfast brought together a vibrant and engaged community, showcasing both the strength of our specialty and the enthusiasm of the next generation. Alongside this, our courses, webinars and digital resources continue to evolve, ensuring that learning is accessible, relevant and grounded in real clinical practice.

We have also seen important progress in our wider work. The development of guidance,

expansion of our grants programme and continued growth of LabourPains reflect a commitment not only to clinical excellence but also to communication, equity and patient-centred care. Increasingly, our work extends beyond traditional boundaries, engaging with data, systems and global health, recognising that improving outcomes in obstetric anaesthesia requires more than individual clinical expertise alone.

At the same time, this has been a year that has prompted reflection. The specialty, like the wider NHS in the UK and many healthcare systems globally, continues to face significant pressures. Workforce challenges, rising demand and increasing complexity of care are part of our daily reality. As an organisation, we are also entering a period of change, including the transition of our administrative support arrangements. While this presents challenges, it also offers an opportunity to think carefully about how we work and how we can best support our members in the years ahead.

What remains constant is the strength of our community. The OAA is, at its core, a membership organisation, shaped by the commitment, expertise and generosity of its members. This report reflects the work of many individuals who contribute their time and energy, alongside busy clinical

roles, to improve care for patients and to support colleagues.

As we look ahead, our focus will remain on maintaining high standards, supporting our members and evolving in response to the changing landscape of maternity care.

**“If there is a single theme that runs through this report, it is that progress in obstetric anaesthesia is rarely about one large step, but rather the accumulation of many small, thoughtful improvements.”**

Thank you to everyone who has contributed to the work of the OAA over the past year.

**Nuala Lucas**  
OAA President



## Trustees and Executive Committee members

at 30 September 2025

**President** Dr N Lucas

**Honorary Secretary** Dr S Armstrong

**Honorary Treasurer** Dr J Bamber

**Honorary Treasurer-Elect** Dr Y Metodiev  
(appointed 15 May)

### Trustees

Dr M Broom

Professor S Devroe

Dr G Crossingham

Dr C Grove

Dr D Hughes (appointed 15 May)

Professor R Kearns

Dr N Kennedy

Dr C Kenyon

Dr C Phillips

Dr L Robbins (appointed 15 May)

Dr V (Rajveen) Sodhi

Dr Sundaram

Dr N Tageldin

Dr V Vanjari (appointed 15 May)

### Committee members (non-voting)

#### International Members representative

Professor M Van de Velde

#### Royal College of Anaesthetists (RCoA) representative

Dr K MacLennan

### Bankers

#### National Westminster Bank plc

149 Church Street, Barnes, London SW13 9HS

### Auditors

#### Moore (South) LLP

Priory House, Pilgrims Court,  
Sydenham Road, Guildford, Surrey GU1 3RX

### Investment Managers

#### Charles Stanley & Co. Limited

55 Bishopsgate, London EC2N 3AS

# Obstetric Anaesthesia Annual Scientific Meeting 2025



The OAA Annual Scientific Meeting (ASM) once again delivered – bringing together cutting-edge best practice, practical learning and a strong sense of community in one standout event.

Held at the International Convention Centre in Belfast on 15-16 May 2025, the two-day meeting welcomed clinicians, researchers and educators from across the UK and beyond. The result: a dynamic programme packed with fresh insights, lively discussion and valuable opportunities to connect.

The meeting opened with a forward-looking session on recent advances, where Dr Robert Ffrench-O'Carroll and Dr Rachel Mathers highlighted key developments shaping current practice. Momentum continued with a deep dive into chronic pain and implanted devices in obstetric patients, as Dr Athmaja Thottungal, Dr Simon Thomson and Dr Honey Thomas tackled the complexities of care during pregnancy and delivery.

Research and innovation took centre stage throughout. The Felicity Reynolds Free Papers sessions showcased outstanding trainee-led work, while more than 200 ePoster presentations highlighted the scale and quality of research across the specialty.

**“ Inspirational and insightful.”**

Members also received a direct update from the OAA on new developments. Dr Nuala Lucas shared updates on current initiatives, Dr Damien Hughes presented refreshed guidance on remifentanyl PCA for labour, and Dr Yavor Metodiev introduced forthcoming guidance on managing pregnant patients with Arnold-Chiari malformation.

Attention then turned to some of the specialty's most pressing clinical challenges. Dr Heather Nixon, Dr Conan McCaul and Dr Craig Lyons led sessions on complications in obstetric anaesthesia, including pain during caesarean delivery, high neuraxial block and airway management.

**“ Enjoyed hearing about the work people are doing and all the speakers did a great job.”**



**Missed a session?**

Members can catch up on all content via the OAA website

## ASM 2025 in numbers



**502**  
delegates



**31**  
faculty  
members



**9**  
exhibition  
stands



**12**  
Felicity  
Reynolds oral  
presentations



**204**  
ePoster  
presentations

Day two maintained the pace, with further Free Papers and ePoster sessions followed by a broader look at maternity care. Sessions on diabetes in pregnancy and general anaesthesia, led by Dr Fatemah Qasem, Dr Neil Black and Dr Tim Knowles, offered practical insights for everyday practice.

The programme also explored the psychological side of care. Dr Chiara Petrosellini addressed perinatal mental health, while Miss Niamh Maguire spoke about the impact of adverse

events on staff, bringing an important human perspective to clinical work.

A standout moment was the Bruce Scott Lecture, where Dr Fiona Donald reflected on how obstetric anaesthesia has evolved and where it is heading next.

The meeting closed with a lively debate on gowning for spinal anaesthesia, as Dr Jim Bamber and Dr Claire Abeysekera went head-to-head, sparking thoughtful discussion among delegates.



# Updates from our Subcommittees 2024/25

The OAA provides leadership in the quality improvement of obstetric anaesthetic care through its subcommittees: Research and Grants, LabourPains, Education, Guidelines, Quality and Outcomes, Surveys, and Communications.

## Research and Grants Subcommittee

The OAA continues to promote research and education through funding grants and bursaries. The OAA also funds numerous education and travel bursaries, including bursaries for medical student elective studies.

### OAA Grant Awards 2024/25

Improving care for women and babies starts with supporting the people and ideas shaping obstetric anaesthesia. The OAA continues to do this through a growing programme of grants and bursaries – backing research, driving innovation and expanding access to education.

Applications are invited twice a year and rigorously peer reviewed, ensuring funding is directed where it can have the greatest impact.

### Evolving for greater impact

In 2025, the OAA strengthened this commitment by reshaping its grants programme. Funding values were increased and the portfolio refined, with a stronger focus on Quality Improvement and Innovation (QII). Five QII grants were introduced and small grants were retired, shifting towards fewer, higher-value awards with greater potential to influence practice.

### Supporting every stage

Up to £211,500 of grant funding is available annually, spanning major research funding, QII projects, and a range of bursaries for trainees, students and members. From early career support to large-scale research, the programme is designed to nurture progress at every stage.

### A year of steady engagement

Across 2024/25, applications were received across all funding streams. Early rounds in 2024 saw a mix of research and travel applications, with awards supporting professional development and student engagement.

This continued into 2025, with applications for QII grants, travel bursaries, ASM bursaries and medical student awards. Following peer review, funding was awarded across each category, supporting innovation projects, enabling learning opportunities and helping to develop the next generation of the specialty.

> In total, £21,824 in grants and bursaries was awarded during 2024/25, compared with £90,699.24 in 2023/24.

Award Date	Grant Type	Name of Person/Hospital	Amount
05/11/2024	Travel Bursary	OAA representation in Sri Lanka	£1,000.00
09/12/2024	Medical Student Bursary	Elective in Vanuatu J Templeton, Cardiff	£750.00
15/06/2025	Quality Improvement	Postpartum analgesia use Dr M Lyons, Edinburgh	£16,324.00
14/03/2025	ASM Bursary	Annual Scientific Meeting Bursary Dr P Welagedara	£1,000.00
09/01/2025	Travel Bursary	World Congress of Anaesthesiologists (WCOA) Travel Bursary Dr M Van de Velde	£1,000.00
28/07/2025	Travel Bursary	WCOA Travel Bursary Dr D Hughes	£1,000.00
13/01/2025	Medical Student Bursary	Elective in Argentina E Blendis	£750.00
<b>TOTAL</b>			<b>£21,824.00</b>

Alongside our regular grant activity in 2025, the OAA gave an **exceptional grant award of £20,000** to the Royal College of Anaesthetists as financial support for the *NAP8: Complications of Regional Anaesthesia* project, recognising its relevance to obstetric anaesthetic care.



# LabourPains Subcommittee

The LabourPains Subcommittee leads the OAA's communications with the public, supporting the OAA's mission to provide trusted, accessible information about pain relief in labour and birth. The [LabourPains website](#) remains a key platform for providing clear, evidence-based information for women, families and healthcare professionals.

Over the past year, work has focused on developing the LabourPains website ahead of a planned relaunch in spring 2026, with a formal launch at the OAA Annual Scientific Meeting in May. Content across the site continues to be reviewed and refined to ensure it remains evidence-based, clear and accessible, alongside improvements to site navigation and user experience. New accessibility and translation tools have also been introduced, enabling the website to be translated into multiple languages and helping to broaden the reach of LabourPains.

LabourPains' digital presence has also expanded through increased social media engagement and the introduction of Google Ads, aiming to improve visibility and drive website traffic.

To support the launch of the updated website, new promotional videos have been commissioned to increase awareness and engagement with LabourPains resources. These include a video for use by professional organisations such as the Royal College of Midwives, as well as a patient-facing video for antenatal clinics, NCT sessions and on-demand viewing.

There remains a strong commitment to providing reliable information about labour analgesia and ensuring LabourPains continues to serve as a trusted resource for women, families and professionals. Work is also underway to develop partnerships with organisations such as Five X More to help extend the reach of LabourPains resources to more diverse and underserved communities.



## Education Subcommittee

The OAA continued to deliver a broad programme of educational activities for obstetric anaesthetists and allied professionals.

Joint multidisciplinary meetings remain an important part of the programme. In October 2024, the OAA held a successful one-day meeting with the UK Maternal Cardiology Society at the Royal College of Physicians. The meeting brought together 120 delegates and nine speakers for a programme of multidisciplinary discussion and shared learning, with very positive feedback from attendees.

The Three-Day Course attracted 360 delegates, an increase from 330 in 2024. The programme featured 27 speakers presenting in person, alongside a Northwick Education in Oxygenation (NEO) airway workshop, which proved very popular with all 20 places fully booked.

The Annual Scientific Meeting 2025 was held in Belfast in May and attracted more than 500 delegates for two days of lectures, panel discussions and research presentations (see [pages 6-7](#)).

The OAA continues to record its events and the launch of the new digital platform has made accessing these recordings much easier for members. Meeting recordings are now hosted on a user-friendly Vimeo platform, with recordings from the past five years freely available to support ongoing professional development and education.

With an increasing number of organisations hosting obstetric anaesthesia meetings, maintaining strong attendance while covering rising costs has become an important focus. Despite these challenges, the OAA remains committed to delivering high-quality educational events with excellent speakers and engaging programmes.



Annual Scientific Meeting 2025

## Guidelines Subcommittee

The Guidelines Subcommittee continues to develop good practice guidance on topics relevant to obstetric anaesthesia that are not already addressed by national or international guidelines.

The first guideline in this programme, on the management of intrathecal catheters, was published in the peer-reviewed journal *Anaesthesia* in September 2024. **The paper has since been cited by 12 publications and has received more than 13,000 full-text views.**

[Read guideline here](#) >

Work on a guideline covering the use of remifentanyl for labour analgesia is now complete and has been accepted for open-access publication in the *European Journal of Anaesthesiology*.

Further guidance is currently in development, including recommendations on the anaesthetic management of pregnant patients with Arnold-Chiari malformations and the evaluation of postpartum patients presenting with new neuropathic symptoms.

## Quality and Outcomes Subcommittee

The Quality and Outcomes Subcommittee (QOSC) continued to contribute to national work aimed at improving maternity care outcomes.

QOSC representatives participated in the NHS England Maternity and Neonatal Outcomes Group, established following a recommendation from the East Kent *Reading the Signals* report. This work has since developed into the Maternity Outcomes Signal System (MOSS), launched by NHS England.

The project highlighted the lack of routinely collected national data relating to obstetric anaesthetic care. In response, the OAA has been working with the Professional Records Standards Body to develop the **Obstetric Anaesthetic Standard**, supporting more consistent data collection and improved understanding of anaesthetic care within maternity services.

## Survey Subcommittee

The Survey Subcommittee oversees the approval and distribution of national surveys examining current practice in obstetric anaesthesia. All proposals are peer reviewed to ensure relevance, methodological quality and to avoid duplication.

The updated OAA Surveys platform, introduced in early 2024, completed its first full year of operation during the reporting period. The system enables electronic submission, peer review and distribution of surveys. It has received very positive feedback from users, particularly for its accessibility and ease of completion, including on mobile devices.

Between October 2024 and October 2025, the subcommittee reviewed 20 survey submissions. Of these, six were approved and distributed to the OAA membership. Nine surveys were completed during the year, covering topics such as neuraxial analgesia practice, airway management in obstetric general anaesthesia, postnatal follow-up services, fasting in labour and safety processes surrounding spinal anaesthesia.

Survey activity supports the OAA's charitable objectives by identifying variation in clinical practice, informing guidance and supporting quality improvement in maternity care.

20 survey submissions since platform updated in October 2024



## Communications Subcommittee

Communications with the profession, membership and the public remain an important part of the OAA's work. Public-facing communication is delivered primarily through the LabourPains platform (see page 10).

The OAA supports its communications through its websites and social media channels, alongside professional editorial and social media support. The OAA also continues its policy of funding open access publication to ensure its research outputs are widely accessible.

In 2025, the OAA commissioned new photographs and illustrations to promote inclusivity and communication with members, healthcare services and the public. The OAA and LabourPains website provider, Adept, provides quarterly Google website analytics to help monitor and better understand website use.



# OAA outreach in 2024/25

The OAA continues to provide professional leadership in obstetric anaesthesia at national and international levels, contributing expertise to a range of clinical and public health initiatives.

OAA Executive Committee members contributed to the "Provision of Anaesthetic Services for an Obstetric Population" chapter in the *Guidelines for the Provision of Anaesthetic Services* published by the Royal College of Anaesthetists. The OAA also supports the Confidential Enquiry into Maternal Deaths by assisting MBRRACE-UK in recruiting national anaesthesia assessors.

The **Regional Societies Liaison Group (RSLG)** continues to strengthen engagement with UK regional obstetric anaesthesia societies. The group has expanded its database to include resident doctor representatives and held a liaison meeting during the Three-Day Course to support networking and discussion. Work is also underway on a project examining the provision of obstetric Specialist Interest Area training across the UK, while the group continues to invite input from regional societies to inform future activity.

The OAA also contributes to several national programmes of public health importance, including the UK Obstetric Surveillance System, the Royal College of Obstetricians and Gynaecologists' Each Baby Counts programme and the UK Maternal Confidential Enquiries (MBRRACE-UK).

## Resident Doctor Representatives

The OAA Resident Doctor Representatives support engagement with trainee anaesthetists through educational activities and networking opportunities.

In 2024/25, they organised resident-focused sessions at several meetings, including case presentation competitions at the Joint OAA/UK Maternal Cardiology Society meeting in October 2024 and the Joint OAA/MOMS meeting in October 2025. They also facilitated the Resident Doctors' Forum at the Annual Scientific Meeting in Belfast and hosted a resident networking reception at the Three-Day Course.

In February 2025, they organised and hosted the webinar "Essential Obstetrics for the Anaesthetist", which attracted more than 400 attendees worldwide. They also contribute trainee updates to the Royal College of Anaesthetists' *Gas Newsletter*, are updating the Obstetric Anaesthesia Fellowships page on the OAA website and represent trainee views across several OAA subcommittees. Shalini Sundaram completed her term as Resident Doctor Representative in May 2025, and Lauren Robbins joined the committee in her place.

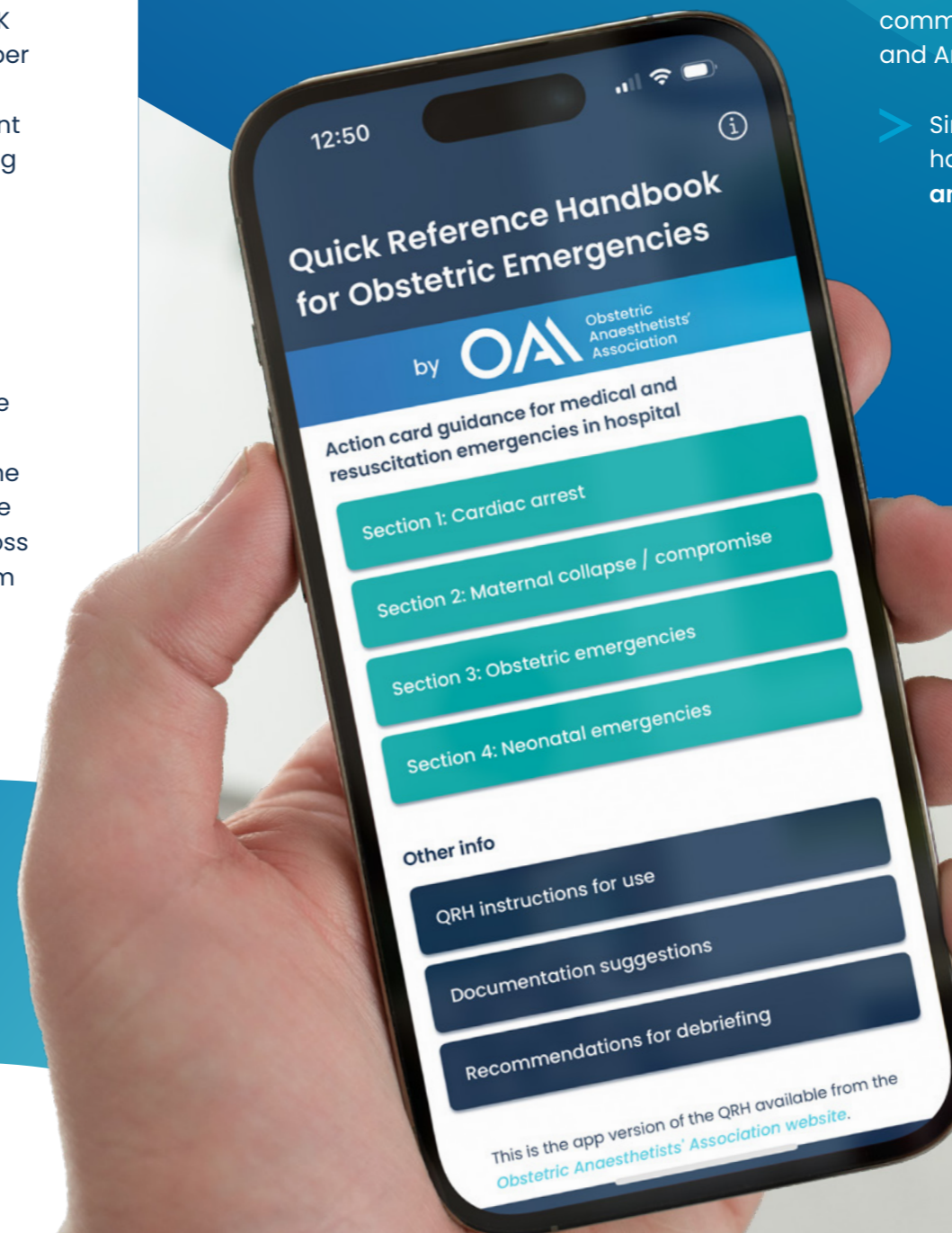


**7,052**  
app downloads  
since launch in October 2024

## QRH app

Following the publication of the open-access **Obstetric Anaesthesia Quick Reference Handbook (QRH)** in 2024, the OAA commissioned mobile app versions for iOS and Android platforms to improve accessibility.

➤ Since its launch in October 2024, the app has been **downloaded 4,940 times on iOS and 2,112 times on Android.**





# Report of the Executive Committee

The Executive Committee, who are the Directors of the Charitable Company (and Trustees under the Charities Act 2011), present a summarised report along with a financial review of the Charity for the period ended 30 September 2025. The full Trustees' Report and Financial Statements can be viewed on the [OAA website](#).

## Governing document

The Obstetric Anaesthetists' Association (OAA) was formerly an unincorporated association formed under a constitution adopted on 26 March 1976, as amended on 23 April 1999, and registered as a Charity under number 272190.

On 18 August 2005, a company limited by guarantee was incorporated and granted charitable status on 20 September 2005 (Registered number 1111382). On 1 October 2005, the assets and activities were transferred from the unincorporated association to the new company.

The Memorandum and Articles of the OAA were updated in June 2009 to take account of the Companies Act 2006.

## Aims and objectives

Our purpose is to improve the quality and safety of maternity care by promoting education, research and information.

## Trustees and co-opted Executive Committee members

At the AGM on 15 May 2025, Dr Damien Hughes, Dr Lauren Robbins and Dr Vinayak Vanjari were elected as Trustees. Dr Gemma Crossingham was re-elected as a Trustee, and Dr Yavor Metodiev was elected unopposed as Treasurer-Elect. Dr Cynthia Shalini and Dr Kirsty MacLennan resigned as Trustees, following the completion of their elected term of office.

Professor Marc Van de Velde is co-opted to the Executive Committee as a non-Trustee and as the International Members representative. Dr Kirsty MacLennan is a non-Trustee and was appointed as a co-opted member in her capacity as the Royal College of Anaesthetists (RCOA) representative, succeeding Dr Felicity Plaats, who stepped down from the Executive Committee.

## Membership

The OAA currently has five classes of members:

### 1. Ordinary Members

Medical practitioners practising in the UK or overseas.

### 2. Associate Members

Individuals who are not medical practitioners but are interested in the objects of the OAA and are admitted by the Executive Committee at its discretion.

### 3. Honorary Members

Individuals elected by ordinary members at the AGM, having first been nominated by a resolution of the Executive Committee.

### 4. Retired Members

Ordinary members may become retired members.

### 5. Foreign Associate Members

Medical practitioners practising in a reduced-fee country as designated by the OAA.

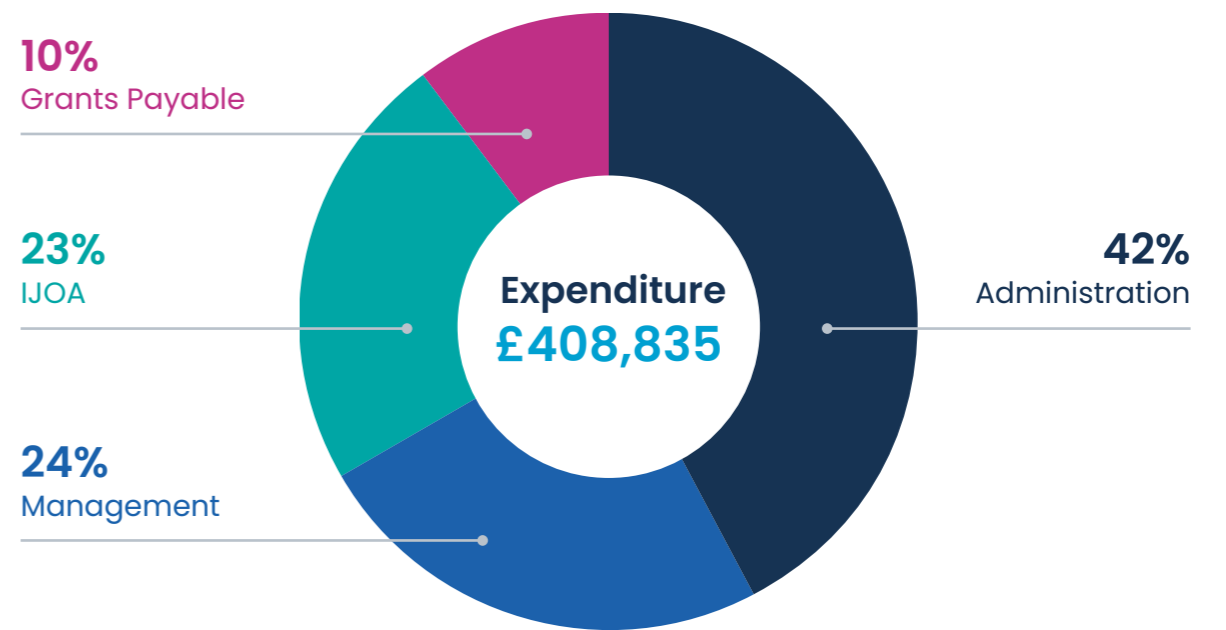
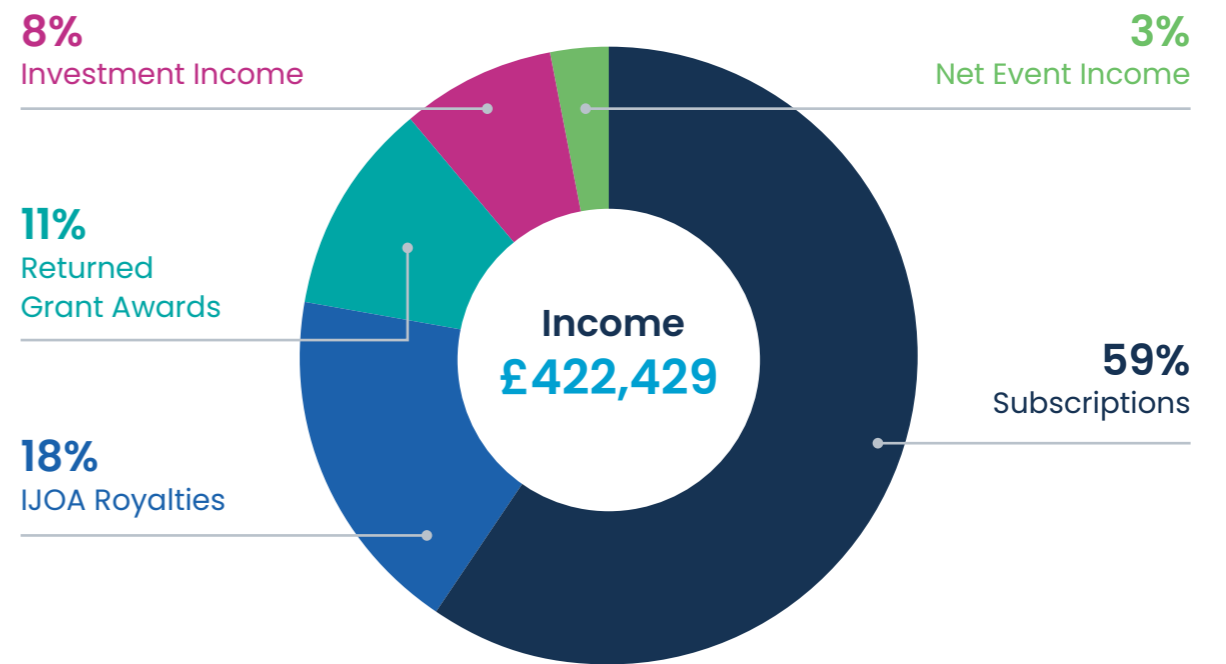
All members can attend and speak at general meetings, but only ordinary members can vote.





# Financial review

Opposite is a summary of our expenditure and income financial review for 2024/25. These graphics show the percentage breakdown of our net income and expenditure.



1. Net operating expenditure excludes £58,931 allocated amortisation cost of digital project (websites, membership and surveys systems upgrade)
2. Management expenses include IT services and support, media support and publications, committee expenses, professional fees
3. Administration expenses include Secretariat administration charges by the Association of Anaesthetists

These summarised financial statements may not contain sufficient information to gain a complete understanding of the financial affairs of the OAA. The full statutory Trustees' Report submitted to the Charities Commission and Companies House with financial statements and auditors' report are available on our [website](#).

## Investment policy

The OAA's investment policy is for its portfolio of investments to be managed on a 'medium-low' risk basis for long-term growth without investing in companies whose prime area of business is tobacco, gambling or armaments. For the year ended 30 September 2025, the investment portfolio had a net portfolio return of 8.45% compared to 11.55% in 2024 and 2.4% in 2023. The OAA investment portfolio managed by Charles Stanley has an MSCI ESG (environmental, social and governance) rating of AA.

There are no restrictions on the OAA's power to invest. The Executive Committee is responsible for investing any amounts surplus to the organisation's immediate requirements as it deems fit. Investment brokers Charles Stanley actively manage these investments.

## Reserves policy

The OAA maintains unrestricted reserves to support its charitable activities, including funding research grants, bursaries and initiatives aimed at improving care in obstetric anaesthesia. The level and structure of grant awards are reviewed regularly to ensure funding remains both impactful and financially sustainable.

Reserves are held at a level sufficient to safeguard the OAA's commitments during periods of income uncertainty and to allow investment in projects that advance the

organisation's objectives. As the OAA's income relies largely on membership subscriptions and surplus income from educational events, maintaining adequate reserves provides financial stability during periods of economic volatility and rising operational costs.

Unrestricted funds have been used to meet commitments to grant awards and administrative costs, and to support strategic investments. These include the upgrade of the OAA's digital platforms, completed in February 2024, with the capital expenditure now reflected as an annual amortisation cost. The OAA is also reviewing its cashflow arrangements to ensure the best return is obtained for funds held on account. In addition, reserves have supported international education initiatives and quality improvement projects with organisations such as the National Perinatal Epidemiology Unit and the Professional Records Standards Body.

In summer 2025, the OAA received 12 months' notice that the Association of Anaesthetists intends to discontinue providing administrative support services. The OAA has commissioned Adapta Consulting (UK) to assist in identifying alternative administrative and event management arrangements. Maintaining adequate reserves will support the organisation during this transition.

The OAA currently maintains unrestricted reserves sufficient to support expenditure and research commitments for approximately three to five years, assuming no surplus income. This represents reserves in the range of £1.0-£1.5 million. The policy will remain under review, particularly if the organisation's income changes significantly in the future.

## Risk management

The Executive Committee regularly reviews organisational risks and systems, with guidance and support from the Secretariat, provided by the Association of Anaesthetists.

## Future plans

The OAA plans to continue its core activities of delivering educational events and supporting its work through membership subscriptions. These activities underpin the OAA's aim of improving care for women, people giving birth and their babies through education, training, research and the promotion of best practice in obstetric anaesthesia.

Work will continue developing resources and initiatives that improve the quality and value of obstetric anaesthetic care in the UK and internationally. This includes working with partner organisations to improve how obstetric anaesthetic care is recorded within national maternity datasets.

The transfer of administrative support and event management services from the Association of Anaesthetists to a new provider will bring a period of organisational change. The Executive Committee is working to ensure that this transition is managed smoothly so the OAA can continue its work and support its members.



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