



Peter G. Moore, M.D., Ph.D.

Clinical Interests	Dr. Moore's clinical and research interests involve cardiovascular and thoracic anesthesia as well as lung transplant anesthesia, subjects on which he has published widely in books and journals.
Research/Academic Interests	Dr. Moore has also conducted research investigating hypertonic saline, airway thermal volume in humans and its relation to body size, and the effects of calcitonin-gene related peptide (CGRP) and adenosine on regional coronary conductance in dogs with ventricular pacing.
Title	Professor
Specialty	Anesthesiology, Pain Medicine
Department	Anesthesiology
Division	General Anesthesiology
Center/Program Affiliation	Cardiovascular Services
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Education	M.D., University of Sydney, Sydney, New South Wales, 1972 Ph.D., University of Newcastle, Callaghan, New South Wales, 1991 B.S., University of Sydney, Sydney, New South Wales, 1972
Residency	Royal Brisbane Hospital, Brisbane, Australia, 1972 Royal Newcastle Hospital, Newcastle, Australia, 1973
Fellowships	Australian and New Zealand College of Anaesthetists, Melbourne, Australia, 1992 Royal Australasian College of Surgeons, Melbourne, Australia, 1977
Professional Memberships	American Association for the Advancement of Science American Medical Association American Society of Anesthesiologists American Society of Echocardiography Association of Anesthesia Clinical Directors Association of Anesthesiology Program Directors & Society of Academic Anesthesiology Chairs Association of University Anesthesiologists



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Select Recent Publications

International Anesthesia Research Society

Society of Cardiovascular Anesthesiologists

Zhong C, Fleming NW, Lu X, Moore P and H Liu. Age-associated differences in gene expression in response to delayed anesthetic preconditioning. *Age*, 2012; (34) 1459-1472.

Lu X, Moore PG, Liu H, Schaefer S. Phosphorylation of ARC is a critical element in the antiapoptotic effect of anesthetic preconditioning. *Anesth Analg*, 2011; 112(3): 525-31.

Liu H, Moore PG. KATP channel blocker does not abolish the protective effect of Na/H exchange 1 inhibition against ischaemia/reperfusion in aged myocardium. *Eur J Anaesthesiol*, 2010; 27(8): 740-6.

Macres SM, Moore PG, Fishman SM: Acute Pain Management, Barash, Cullen, Stoelting, Cahalan and Stock, 6th edition, (ed), *Clinical Anesthesia*, 2009; Vol. Chapter 57, pp.1473-1504.

Konia M, Uppington J, Moore P, Liu H. Ascending aortic pseudoaneurysm: a late complication of coronary artery bypass. *Anesth Analg*, 2008; 106(3): 767-8.

Nguyen NT, Ho HS, Fleming NW, Moore P, Lee SJ, Goldman CD, Cole CJ, Wolfe BM. Cardiac function during laparoscopic vs open gastric bypass. *Surg Endosc*, 2002; 16(1): 78-83.

P.G. Moore, Quail, A. W., Cottee, D.B., McIlveen S.A., and White, S.W. Effect of Fentanyl on baroreflex control of circumflex coronary conductance. *Clinical and Experimental Pharmacology and Physiology*, (2000) 27, 1034-1038.

Porges, W.L., Hennessy, E.J., Quail, A.W., Cottee, David B.F., Moore, P.G. McIlveen, S.A., G.H. Parsons and S.W. White. Heart-Lung interactions: The sigh and autonomic control in the bronchial and coronary circulations. *Clinical and Experimental Pharmacology and Physiology* (2000) 27, 1022-1027.

Cottee, D.B., Quail, A., Porges, W.L., P.G. Moore and S.W. White. Effects of anaesthesia on regional coronary control mechanisms. *Clinical and Experimental Pharmacology and Physiology* (2000) 27, 1034-1038.

Kien ND, Reitan JA, Moore PG. Hypertonic saline: current research and clinical implications. *Seminars in Anesthesia, Perioperative Medicine and Pain*, 1998; 17(3): 167-173.

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