



Department of Emergency Medicine

Friday **email**

Updates for ED Physicians

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Operational Updates

UPDATE FROM NEIL COLLINS:

CPSA Concern

- the College has signaled to Calgary Zone ED's that we may not be in compliance with one of their Standards of Care
- the issue involves how we report back to Primary Care Physicians
- an explanation can be found [in this document](#)

Methamphetamine

- it has recently become clear the methamphetamine abuse is having an enormous impact on our Emergency Departments
- you will all have noticed that many of our beds are occupied by patients requiring physical and chemical restraint for agitated delirium, usually due to meth
- much of the crisis in mental health patients boarding in the ED can be traced to the impact of meth on patients with pre-existing mental illness
- we have had several ED staff members assaulted recently from patients suspected to have used meth
- **WHAT I WOULD LIKE FROM YOU: Please include the word "Meth" or "Methamphetamine" in your discharge diagnosis if the abuse of that drug is confirmed or suspected to be part of the reason the patient is in the ED**
- there is a province wide effort to address the situation and we would like to have accurate surveillance numbers

Pneumothorax

- A reminder that there is a new standard for equipment used in both traumatic and spontaneous pneumothoraces
- The Quick-Thal kit is used for spontaneous pneumos, and if you are doing an "open" procedure, **a size 28 Fr tube is the standard** (I mistakenly said 26Fr in the last newsletter)
- More details to follow, but the resuscitation rooms should all have a cart with this equipment stored in it.
- as per my last communication on this; please note that the location of chest tube insertion, as well as anchoring, suturing and dressings are all standardized

My DI AVL

- a reminder to please review your final DI imaging reports on "My DI AVL"
- we are responsible for the results reported on of any test that we order

Summer Schedule

- schedulers are working on the summer schedule, as previously noted, some MD's (with less than 5 years experience) may be getting 2.0 or 2.5 weeks of holidays instead of 3

- Neil Collins

! SCM Updates - Need to Know

Changes to Sedimentation Rate (L-ESR) and C-Reactive Protein (CRP) in Impacted Order Sets

March 28, 2019

ED Order Sets Impacted:

- ED Common Labs
- ED Decreased LOC
- ED Fever
- ED Headache
- ED Abdominal Pain Peds
- ED Arthritis Peds
- ED Cervical Adenitis Peds
- ED Common Labs Peds
- ED Fever Peds
- ED Fracture/Dislocation Peds
- ED Inflammatory Bowel Disease Peds
- ED Septic Arthritis/Osteomyelitis Peds

A blue grid has been added to Sedimentation Rate in the order sets listed above. If the order is selected, the entry form will open as 'Clinical Indication' will now be a required field. This change is in accordance with the [Calgary Lab Services memo](#) from October 2017, encouraging use of CRP over Sedimentation Rate as it provides more valuable information.

General Lab Order Entry Form Blood - PIEM SCM Bella, Test 1

PIEM SCM Bella, Test 1 2160073181 / 10007160... 18y (2001-Jan-01)
ACH-1-1104-1 Brenner, Jennifer L
Weight: 12kg

Order: Sedimentation Rate Order ID
Requested By: Physician, One Generic Template Name:
Messages:

Conditional Order: Max # of activations:
Specimen Type: Blood Pending Discharge:
Requested Collection Date: 2019-Mar-27
Collection Time/Priority: Unit to Collect, STAT

Clinical Indication: [List of conditions]
Additional Info to Nursing: [List of conditions]
Advisory Note: [List of conditions]

ED Order Sets Impacted:

- ED Pericarditis
- ED .Fast Track

- ED Intravenous Antibiotic Therapy
- ED Septic Joint
- ED Agitated Patient Peds
- ED Anemia Peds
- ED Periorbital Cellulitis Peds
- ED Retropharyngeal Abscess Peds
- ED Sepsis Peds
- ED Agitated Patient

Sedimentation Rate has been removed from the order sets listed above.

‘MR Outpatient Booking Request – Peds’ Reminder

As of February 2018, orders for outpatient MRIs have been entered electronically in SCM as opposed to paper requisitions. The ‘MR Outpatient Booking Request – Peds’ is the appropriate order for pediatric outpatient MRIs and must be used so that it can be processed properly. This order item can only be found in the ED .Discharge Peds order set and is the only SCM order that should be used for outpatient MRIs to be performed at ACH. Do not use inpatient orders for outpatient MRIs.

The screenshot shows a medical order entry interface for a patient named Berry, Blue. The patient's information includes RGH-ED-Area F-11, Weight: 40kg, and a date of birth of 8/3m (2010-Dec-08). The order set is 'ED .Discharge Peds' with 2 orders selected. The interface includes several sections: 'Other Meds To Go - 1 item(s)', 'US on Return Visit - Pt to be Discharged', 'US on Return Visit - Pt to be dc'd - 3 item(s)', 'MR Outpatient Booking Request' (highlighted with a red box), and 'ED Meds to be Ordered on Return Visit'. The 'MR Outpatient Booking Request - Peds' option is currently unchecked. The 'ED Meds to be Ordered on Return Visit' section lists several medications like cefazolin inj, ceftriaxone inj, cefuroxime inj, clindamycin inj, and gentamicin inj.

New 2-hour pathway for suspected ACS using high-sensitivity troponin

A 2-hour evidence-based multidisciplinary pathway for patients with suspected acute coronary syndrome (ACS) using high-sensitivity cardiac troponin-T (hs-cTnT) is currently being implemented in the Calgary zone.

[Read full information here.](#)

3 available spots for Staff Simulation

- PLC April 9 @8:30 AM
- PLC June 11 @ 8:30 AM
- SHC June 25 @ 9:30 AM

Please follow link below to sign up. Thank you.

<https://www.signupgenius.com/go/60b044aaciaa23a6f85-emsimulation3>

Tia Green
Education Assistant – Emergency Medicine
Foothills Medical Centre

ComputER Corner - Sunrays & SEC Downtimes

First and most importantly, I'd like to extend a special thanks to Cam McGillivray and James Huffman for testing out the new EDSP (=Sunray replacement) terminals. As mentioned last week, we have test terminals set up in each department with an anticipated roll out towards the end of April. If anybody else is interested in checking out the new terminals, please let me know.

Also, since the SEC downtime notices seem to come out later every month, here is a link to the master list of scheduled downtime dates for 2019:

<https://insite.albertahealthservices.ca/Main/assets/tms/it/tms-it-scm-scheduled-downtimes-for-2019.pdf>

In general, downtimes occur the last Wednesday overnight / Thursday morning of each month.

Matt Grabove
ED Medical Informatics Physician Lead

Child Abuse Referrals

If a child you're referring with concerns of sexual abuse has an acute finding on exam (eg genital bleeding or bruising) this is an urgent consult. It can't wait two weeks to be seen in clinic as the finding may be gone, so please call the child abuse physician on-call so they can arrange to see the child urgently.

Hilary Ambrose

PGY5 Emergency Medicine
Pediatric Emergency Medicine Fellow
University of Calgary

What do you think about the 72-hour re-admission alert?

To gain a greater understanding of the 72-hour re-admission email alert and its role in self-reflection on practice we are conducting a qualitative study. We would like to hear from you!

What it would involve is an approximately 30-minute one-on-one interview in April with our research assistant. (it can be in-person or on the phone) The questions will surround your experience and feedback on the 72-hour re-admission email alert.

Please provide us with some availability using our online form <https://goo.gl/forms/GeJZCu5SL4tWZBX2>

OR send me an email
Catherine Patocka
thanks in advance and for your support of this initiative

This study has been approved by the University of Calgary Conjoint Health Research Ethics Board Ethics ID REB18-1285

Education. CME. Rounds

April 4 EM Grand Rounds

April 4, 2019

9am-9:45am "[New onset Atrial Fibrillation: Controversies around Cardioversion and Anticoagulation](#)"

presented by Dr. Joline Bohne

9:45am-10:30am "What's new in ID? Updated C.Diff Guidelines & Steroids in Pneumonia" presented by Dr. Geordon Avery-Cooper

Journal Club Summary

[Update on PE in Pregnancy: A Topic Review](#)

CPT Pearl of the week - [Gamma hydroxybutyrate](#) (GHB)

ODT Virtual Health Learning Session

April 18, 2019, 9am-12noon (unfortunate conflict with ACH rounds as an exceptional occurrence)

All you ever wanted to know about Methamphetamine and more... [Click for poster.](#)

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Registration Open: Procedural Skills Workshop- Vascular Access Central Line Pacemaker & Interosseous Access. May 09. 2019

Hello everyone,

Registration is now open for the next Procedural Skills workshop.

Topics

- Vascular Access Central Line Pacemaker
- Interosseous Access

Date/Time

Thursday, May 09, 2019

1300 to 1600

Location

Room G820, DRY Lab on the MAIN LEVEL, NOT the ATSSL wet lab in the basement ([map attached](#))

Facilitators

Tony Chad

Ian Wishart

Cost

Free as this is open to all physicians contributing to the Physicians Support Fund.

PSF Late Cancellation Policy

Members must cancel their attendance 48 hours prior to the start of the course/workshop. Cancellation within 48 hours of the start of the course/workshop will incur a penalty of \$100.00. All monies received due to late cancellations will be deposited into the general PSF account.

Registration

Email Amani to register. First 32 to respond will be accepted.

ED Highlights

Publication of Note

[*Use of Pharmacologic Sleep Aids and Stimulants Among Emergency Medicine Staff Physicians in a Canadian Tertiary Care Setting: A Web-Based Survey*](#)

Marc N. Francis, MD, FRCPCa, Ian M. Wishart, MD, CCFPa. Tyler Williamson, PhD, MScB, Ryan Iverach, MD, DCc

[Save the Date!](#) Dr. Shawn Dowling's Presentation - ED Academic Position in Quality Improvement Science.

Hello Everyone,

We are pleased to invite you to attend Dr. Shawn Dowling's presentation on Thursday, May 30 at 8.15-9.00am at FMC auditorium. This presentation is part of Dr. Dowling's application for the Academic Position in Quality Improvement Science at the Department of Emergency Medicine.

Breakfast will be provided and everyone is welcome to attend!

Sent on behalf of the Department of Emergency Medicine and the Position Search and Selection Committee.

Emergency Medicine Research Day - April 11, 2019

Keynote: Lucas Chartier " Transform: The Science of Health Improvement

[Full program here.](#)

Link to register is here: <https://www.eventbrite.com/e/emergency-medicine-research-day-2019-tickets-53021521799>

Opportunities

Clinical Knowledge Lead - Adult Emergency Medicine

Dear colleagues,

Please join me in congratulating Dr. Catherine Patocka for a very productive term in the role as Clinical Knowledge Lead for Emergency Medicine in AHS.

She is of course moving on to a critical and important role in medical education as the Program Director for the Royal College EM residency program.

The position she occupied in AHS is now open and anyone who might be interested in applying for this position should feel free to contact me, Tom Rich or Matt Grabove with any queries. [Click here](#) for description.

Thanks,

Eddy

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Miscellaneous

Go Fund Me for Emerg Nurse Vicki Jenkins

<https://www.gofundme.com/vicki-jenkins039-quest-to-kick-cancer039s-ass>

Department of Emergency Medicine - Calgary