Dear colleagues,

In this holiday edition of Notes, we will leverage a seasonal theme and present to you the 12 things that we as a department can be exceptionally proud of and grateful for.

On the first day of Christmas my department gave to me....

1) A province that provides solid and reliable emergency care.
We live in a province, whereby most objective measures, emergency care that is superior to nearly all other provinces in Canada. See the interactive dashboard that highlights how Alberta compares to other provinces on key quality and operational metrics. 
https://app.powerbi.com/view?r=eyJrIjoiMjU4ODM1MWItMDRkY100MzE3LWFjNDEtYzU0NyAzMTEyNDMyMiI6Mn0= 

2) Our Calgary Zone comparing favorably to other urban zones.

Within Alberta, Calgary Zone compares generally favorably to our Edmonton neighbors particularly on measures like return visits, left without being seen and length of stay for admitted patients.

https://focus.hqca.ca/charts/patients-who-left-without-being-seen-lwbs-by-an-emergency-department-doctor/ 

3) A government with EM priorities at the top of the list.

Our government, duly elected, continues to identify Emergency and EMS wait times as topic Acute care priorities. https://www.alberta.ca/albertans#acute-care 

4) A Department that doesn’t close our door. 24/7/365 EDs.

We don’t close our door or set caps on the number of patients we are willing to see; or at least this is not the case in the Calgary Zone - urban. This is unfortunately an increasingly common issue for other services across our Zone, the province and other jurisdictions where diversions and other service disruptions are becoming more common. We are there for Calgarians and Albertans 24/7/365 and to do so requires a sacrifice of time with loved ones over the holiday period; that is unique to who we are as emergency physicians. 

5) A positive collaborative and kind EM culture.

While our working conditions are strained during periods of high capacity and hospital occupancy, we continue to enjoy the positive culture that is inherent to our specialty. See this endearing YouTube video from Eva Purdy which captures this. https://www.youtube.com/watch?v=rasEIDExKA 

6) Awesome EM leadership teams including PSF.

Your leadership teams, both educational, and operational are dynamic engaged and committed to improving the way we train our future MDS and to providing exceptional patient care. This translates into training programs that are the envy of the country and working conditions that have our program graduates and emergency physicians external to Calgary knocking at our door looking for work. Also a shout out to the dedication of the Physician Support Fund team led by Arun Abbi and Sean Fair for doing the arduous and important work of allocating vitally important funds to key functions in our department. 

7) Aligned and committed nursing and operational leadership teams.

Our nursing and operational leadership teams are exceptional, committed and supportive. Our ZDEM committee is co-chaired by Emma Foltz, the new programmatic Executive Director for Emergency at the Zone level as well as Michael Suddes and ourselves James and Eddy. We meet monthly and tackle a range of issues that requires a multidisciplinary approach. 

8) A group of folks that know how to have fun.
9) An dedicated, effective and supportive administrative team.

Our department could not achieve what it has and what it continues to do without the support of Scott Banks (Department Manager) and the many members of our administrative team including Natalie Sun (communications), Monica Lee, Madhavi and Tris Talasila (education), Jordan-Rose Detillieux, Maria Gan (PRC) and Lilian Prudencio (team lead).

10) Senior AHS leaders who have our department’s back.

Despite the tumultuous changes in AHS there is still a marked stability of very senior AHS leaders who advocate for our department. These include Mark Annselmo (ZMD), Elizabeth McKay (our AZMD), Colin Del Castilho (AZMD), Nancy Zuzic (Leader in Physician Relations and Planning), Laurie-Ann Baker (ACMO), Sid Viner (VP and Medical Director), Cheri NJssen-Jordan (AZMD) and Peter Jameson (Interim CMO)

11) A research division that is punching well above its weight.

Kudos to Kathryn Crowder, Stephanie Vandenbarg and the whole research team including Jessalyn Holodinsky, Andrew McRae and support staff Christina Cherian and Jill Vandenbarg for a vigorous and busy program with numerous projects on the go, a number awaiting publication and several grant applications in the hopper. Research Day featuring Dr. Shelley McLeod is sure to be an eye-opening and inspiring draw featuring lots of local work.

12) A calling like no other.

Emergency is a unique specialty where we focus on the care that is provided through our essential safety net function for society. While some ED visits can be a source of frustration, at the end of the day we take the high road and care for those who literally have no place else to go in times of crisis.

Unfortunately, a lump of coal must be noted. Sadly, the gains we were able to achieve since the launch of the Health Action Plan and its focus on Emergency Wait times have been curtailed especially at SHC / PLC. This is being driven by service disruptions, the respiratory season and without any significant postponement in scheduled surgeries to increase hospital capacity. We are working hard to ensure better times ahead on this front.
On behalf of your leadership teams James and I would like to thank you all for your dedication and service to our department and wish all of you a wonderful, happy and healthy holiday period.

Eddy and James

---

**Connect Care Weekly Update**

1) **EIP OVER CAPACITY WORKFLOW**
A couple of weeks ago we circulated a workflow in the newsletter regarding how to change the designation of patients to Emergency Inpatient (EIP) for patients who are being boarded in the ED. Please note that we have experienced some unexpected and unintended patient movement / admissions when using this workflow, so we have decided to SUSPEND its use.

Until further notice, please **DO NOT use the EIP workflow**.
We are continuing to work on ironing out some of the communication issues that led to the unintended admissions, and we are hoping to be able to reinstate the EIP workflow at some point in the near future.

2) **FORM 1 WOES**
We have been made aware of some issues regarding the completion of MHA Form 1's using the e-Sign document function. A couple of key points to remember:

a) ALWAYS REMEMBER TO SIGN YOUR FORM. This can (and should) be done electronically. Note that the Signature Box will only allow you to sign the form once all the mandatory fields have been completed.
b) REMEMBER THAT THE THREE TIMES ON THE FORM MUST BE IN SEQUENCE AND MUST BE DIFFERENT FROM EACH OTHER (ie - the 'Start of assessment' must come before 'End of Assessment' which must come before 'Time of issuance'). Note that if you simply 'tab' through the various time fields, the 'Time of Issuance' field will auto-populate with 'Now', which will mean it won't necessarily meet these criteria depending on what times you fill into the other fields.

3) AMBULATORY REFERRAL REFUSALS
We have been hearing about a number of outpatient referrals being refused. If you are having any unusual problems with referrals you believe are appropriate but are being repeatedly declined by specific clinics please let me / your site chief know. (NOTE - we won't be taking on the job of 'convincing' clinics to accept individual referrals but it would be nice to know if there are any patterns emerging that we can address zonally / provincially.) When you receive a refusal, please be aware that in many/most cases the referrals are being declined because the referral criteria have not been met. Please always check the criteria for the specific clinic you are referring to by accessing the Alberta Referral Directory (ARD) link that is available in all Ambulatory Referral orders (website is https://albertareferraldirectory.ca) It is sometimes the case that routine (non-urgent) referrals will require a large number of pre-emptive investigations that may exceed the scope of an ED visit. In such cases, it is worth considering whether the ED is the best place to initiate such referrals, and whether the patient would be better served by connecting them with a primary care physician to pursue the matter further.

4) MEDS TO GO
Please remember that the nurses require an order to be able to dispense 'meds to go' from the ED. The Communication that is embedded in the Dispo tab (where you detail which med / how many tabs to go) DOES NOT constitute an order. You MUST have either a Dispo tab prescription OR a during-visit order in the Orders tab for the same medication for the nurses to have an order to be able to dispense the medication with. The proper workflow is detailed in the Common Workflows document:

https://docs.google.com/document/d/11wPjhRV0wJ_.1jzAU9k35BFth2sg03lp/edit?
usplsharing&ouid=1084195076869552471&rtpf=true&sd=true
As always, if you have any questions please don't hesitate to ask.
Chris

---

**Grand Rounds and Journal Club**

Pearl of the Week

This week's topic: Extravasation Injuries Part I: Acidic, Alkaline, and Osmotic Vesicants

https://secure.campaigner.com/media/7776142/Emergency%20Medicine/December%202023/POTW-
ExtravasationInjuries.pdf?id=sxvxp8d?f_type=file&f_name=POTW-ExtravasationInjuries.pdf

---

**Departmental News**
MD Spotlight

In this month’s spotlight we have the amazing Dr. Kathryn Crowder! You can read more about this amazing doctor here:

https://profiles.ucalgary.ca/kathryn-crowder

We’d like to get to know you!

If you’d like to part of this feel good feature, please send natalie.sun@ahs.ca a short bio (max 200 words) with 1-3 photos you’d like to share. Here are some questions to get you started.

1. When did you start with Emergency Medicine?
2. What is something you’ve learned in your career that has shaped how you care for patients?
3. Who inspires you to be your best?
4. Remember to update your UofC profile (see link below) and we can add this to your bio!

https://web.ucalgary.ca/technical-resources/profiles-system/logging-and-editing-profiles

Resident Retreat February 23-25th in Canmore… PLEASE BOOK NOW!

Hello all:

You are all invited to the upcoming resident retreat being held from February 23-25, 2024 at the Malcolm Hotel in Canmore. We are looking forward to another fantastic weekend.

All staff are welcome (and encouraged) to attend this family-friendly weekend, but even if you can just make it to one day or part of the day, the residents would love to see you and get a chance to interact with you.

More information in the link below:

Wellness Peer Support

The practice of medicine is rewarding but may be challenging. The University of Calgary Department of Emergency Medicine has a formal Peer Support Team. We encourage you to reach out to our trained peer supporters when dealing with personal or professional challenges such as relationship issues, poor patient outcomes, career-track indecision, occupational distress or mental health concerns.

Here is the list of formally trained Peer Supporters:

You can call the Physician and Family Support Program (PFSP) 24/7 at 1877SOS4MDS for help. You are entitled to free counselling for yourself and for your family members.

Clinical/Adjunct Promotions and Awards Deadlines

The 2024 deadlines and application requirements for the Clinical/Adjunct promotion process can be found here on our website: https://cumming.ucalgary.ca/departments/emergency-medicine/kudos/academic-
**Important forms include:**

- 2024 Promotions Process
- Education Contributions for the Purpose of Promotion

For questions, please contact Jordan: [Jordan-Rose.Detilleux@albertahealthservices.ca](mailto:Jordan-Rose.Detilleux@albertahealthservices.ca)

---

### Gala Update

The Emergency Medicine Gala was a great success financially again this year. The silent auction raised funds for the DOAP team and Woods Homes Foundation. Because of your generosity we were able to donate $3500 to each charity.

Thank you for all you do every day for our community and for your donations through the gala.

---

### Teaching Opportunities

**Staff Examiners Required For CCFP-EM Oral Exams: 2024**

**Thursday’s March 14th, 2024 – In Person**

The CCFP-EM Residency Program is in need of eight staff examiners for the oral exams for the date below:

- **March 14th 2024 from 1030 – 1300**

These exams are In-Person sessions. Lunch will be provided.

Please check your availability and let Tris know if you are able to help on any of these dates. Send responses to [TriSurendra.Malasani@albertahealthservices.ca](mailto:TriSurendra.Malasani@albertahealthservices.ca)

Your help and assistance is very much appreciated!! Once confirmed Tris will send Calendar invites.

---

### Recruiting Facilitators for the 2024 Emerg UME Sim Program

Medical students (elective and mandatory clerks) rotating through emerg will have a simulation during their 2-week block. These will generally be on **Thursdays 09:00-11:00 in the Health Science’s ATSSL (G820)**. This group ranges from 6-14 learners and will typically require 2 facilitators per session. Your role will be to pre-brief, manage the scenario, and facilitate debriefing. You will receive the case including a review of teaching topics so it will be low preparation.
Remuneration is at the UME teaching rate $125/hr.

Sign up included below. Thank you for considering! Please reach out to Ryan Wilkie if you have any questions.
https://docs.google.com/spreadsheets/d/1WUNmBmUr4b8OG0OB1RH2f1PcLb8nKgdWCCStiC-juU/edit#gid=1295193520

---

**Job Postings**

**Emergency Department Deputy Head - Education (Physician Development and Continuing Medical Education)**

A rarely available opportunity has become available for the Emergency Department Deputy Head - Education role.

To apply for this opportunity, please email me a cover letter highlighting your interest and skillset for this position, along with an updated CV. Cover letters and CV’s should be emailed to: Scott.H.Banks@albertahealthservices.ca and should be received no later than January 7, 2024.

If you have any questions about this role, please feel free to call (403) 681-7309 or email Scott (email above) or Fareen (fzafer@gmail.com)

Details about this position and others can be found on our job webpage below.

---

Did you miss a job opportunity in one of our past newsletters? Navigate to our new page where we will host job postings for a designated time: [https://cumming.ucalgary.ca/departments/emergency-medicine/job-opportunities](https://cumming.ucalgary.ca/departments/emergency-medicine/job-opportunities)

---

**Other Opportunities**

**ER Shifts in Strathmore and High River**

We have multiple unfilled ER shifts in Strathmore and High River needing coverage.

**Strathmore ER Shifts**

- Sunday, December 24th 2200-0800
- Monday, December 25th 2200-0800

Physicians can contact Dr. David Piesas, Section Chief, Strathmore david.piesas@ahs.ca

**High River ER Shifts**

- January 2 ER night (10pm-8am)
- January 28 ER day (8am-3pm)
- February 21 ER day(8am-3pm)
- February 23 ER day(8am-3pm)
- March 22 ER night(10pm-8am)

Physicians can contact Dr. Chris Warner, Section Chief, High River christopher.warner@ahs.ca
Are you a healthcare worker, allied health professional, or with protective services in the emergency department?

WE'RE RECRUITING

Your participation in an interview will help us to understand how to improve ED care experiences for patients living with dementia and their care providers.

To participate, click here or scan the QR code

Healthcare provider experiences in caring for older adults living with dementia in the emergency department
This study has been approved by the University of Calgary Conjoint Health Research Ethics Board (REB23-0607)
Dr. Zahra Goodarzi

Invitation to Participate in a Provincial Study on Cancer Diagnosis in Alberta's EDs

This initiative is a partnership among the Cancer Strategic Clinical Network (SCN), the Emergency SCN, and the nursing team at the South Health Campus Emergency Department (Calgary), Alberta Health Services.

- Quick Overview: Study Focus: Understand the perspectives and experiences of healthcare providers in Alberta's EDs concerning the cancer diagnosis period. End Goal: Refine and optimize cancer diagnosis pathways to improve patient care across the province.
• Why This Matters: Many patients diagnosed with cancer in Alberta are identified following an ED visit, often at later stages, which complicates treatment. Your insights are invaluable as they are key to ensuring timely diagnoses and improving patient outcomes.
• Participation: Engage in a 45-60 minute interview (in-person, phone, or virtual platforms). Opportunity to review and provide feedback on the study’s key findings (optional).

If you are interested in participating in this initiative, or have any questions, please directly contact Cassandra Carrier Cassandra.Carrier@ahs.ca or Dr. Anna Pujadas Botey Anna.PujadasBotey@ahs.ca, co-principal investigators.

For a more comprehensive overview, the study information sheet is attached: https://secure.campaigner.com/media/77/776142/Emergency.Medicine/October 2023/EDperspectivesCancerSCN.pdf?id=mund23y?f_type=file&f_name=EDperspectivesCancerSCN.pdf

---

Newsletter Process

Submissions can be sent to: natalie.sun@albertahealthservices.ca.

For reoccurring submissions, there is a max three week run. If you would like to re-run your submission, please resubmit with updates.

• Submissions will run for a period of one week unless specified.
• Body copy will be edited at the discretion of the editor to optimize communication.
• Deadline is Tuesday at noon.

---