

The DEMOCRAT

Autumn 2015

DEPARTMENT OF EMERGENCY MEDICINE
OPERATIONAL CLINICAL RESEARCH & ACADEMIC TABLOID

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EMS 90/90

Beginning in early September, AHS has embarked on a province-wide initiative to address the serious issue of EMS holding patients in corridors and hence not being able to return to service on the road. As the title suggests the goal is for 90% of EMS arrivals to achieve a turnaround time of 90 minutes, something that we are fairly short of achieving on most days. Considerable resources are being invested in the Calgary Zone to look at the myriad of factors that are leading to corridor holds consuming EMS resources. While boarding is a factor to be sure it is surprisingly not the leading issue in many settings where corridor patients are found in considerable numbers despite few emergency inpatients. The EMS 90/90 is an initiative that can be influenced by numerous stakeholders and among these consultant response times and decision-making is being addressed. Our processes are a factor as well and particular attention to reassessments with an eye to potential discharge creates the capacity that allows EMS to transfer care to the ED team. Please let your site leadership know if you have concerns or see opportunities in relation to this project. Dr. Gerald Lazarenko EMS lead for the zone would also be keen to hear your thoughts.

University of Calgary EM



After months of hard work by Santiago Santa-Cruz, Amani Otoom and with guidance from Dr. Chris Bond and work by the website committee the impressive U of C website has been launched in a secure mode requiring a preceding UCID sign in and will soon go public with secure sections. Please have a look at the existing content and provide any feedback regarding opportunities for improvement, corrections and additional functionality.

Check out the sections highlighting Journal Club reviews, EM Ultrasound tutorials and Shawn Dowling's clinical cases. Watch for Grand Rounds summaries and a myriad of other resources for supporting clinical care and operations in the coming months. The website will be the Department's public web presence highlighting our teaching programs and research activities.

Also be sure to follow @UCalgaryEM on Twitter for upcoming events and new FOAMed (Free open access medical education) developments





Quality Improvement Program Expansion

Dr. Adam Oster is well underway as the Zone QI lead for EM with a number of promising projects being explored and actively undertaken. These include a mechanism for reconciling interpretation differences with DI at the end of shift using an electronic interface. Other important initiatives relate to embedding care plans for patients with high risk and rare conditions into the electronic health records. Those with rare genetic bleeding disorders who require specific and uncommonly used management is a good example. A project looking at providing ED MDs in the zone with feedback on sign-over is also being considered. One mechanism to achieve this would involve post shift electronic surveys asking for feedback on a recently received handover. These will be collated anonymously and provided to the MD who provided sign-over on a quarterly basis. Please don't hesitate reaching out to your site lead and/or Adam with suggestions for improving care at a system level. A funding opportunity exists through AHS with an end of October deadline for submission.

Provincial Clinical Pathways

Congratulations and a big thank you to Drs. Chris Hall, Shawn Dowling, Andrew McRae, James Andruchow and Fayaz Harji for contributing to a major initiative through the Emergency Strategic Clinical Network. Spearheaded by Dr. Michael Bullard at the Department of EM, University of Alberta a rigorous process has produced a number of platform-agnostic (applicable to any paper-based or electronic health record) comprehensive clinical pathways for common emergency medicine conditions such as deep vein thrombosis, chest pain evaluation, non-variceal upper gastrointestinal bleeding and pulmonary embolism just to name a few. The vision for this project would be for all Alberta EDs to adopt these clinical pathways or variants as care guidelines. Kudos again to those involved in helping set evidence-based standards for optimal investigation and treatment for Albertans presenting to EDs well beyond the Calgary Zone.

Gala Night

What a remarkable evening and two years running! Congratulations to Dr. Baker and the intrepid and deft organizing committee for hitting it out of the park again this year. What a treat to see colleagues receiving recognition for their accomplishments in making the department a better place to work. With a festive backdrop and a fundraising opportunity targeting the medical program at CUPS the sold-out event was enjoyed by all who had the good fortune to attend. Special thanks to Dr. Jennifer Puddy and Angelo Mikrogiannakis for serving as charming and energetic emcees keeping the evening running efficiently and enjoyably.



CUPS Coordinated Care Team

A project funded through Greenshield Canada sees funding for two full-time positions based at FMC connecting complex high needs patients, characterized by frequent utilization, substance abuse, mental health concerns and low income to the myriad of resources available through the Calgary Urban Project Society. The team's headquarters can be found at the desk between the low and high 20s in the FMC ED. Referrals are welcome off hours as well and blank forms are posted on the bulletin board at this location. Please consider making full use of this resource since it is currently only funded as a two year pilot pending evaluation metrics including utilization and outcomes for referred patients.

<http://www.cbc.ca/player/News/Canada/Calgary/ID/2658273892/>



Clinical Informatics

Congratulations to Drs. Tom Rich, Shawn Dowling and Michael Wolfe for tremendous work resulting in much expanded functionality within our order sets with particular emphasis on the discharge module which are now uploaded into Netcare providing other healthcare providers with key information on the patients episode of emergency care and any significant changes introduced. Working through the ED Clinical Informatics Committee a number of changes are being developed and implemented to further enhance the effectiveness and efficiency of ED-based care as well as information sharing through patient handouts. A comprehensive and multifaceted plan to reduce unnecessary anticoagulation testing is being spearheaded by Shawn and is demonstrating early returns. It has also garnered interest at the provincial level for a far larger scope implementation. Order set developments are ideal projects for trainees and a number are now collaborating with us to create evidence-based guidance in the management of hypercalcemia and hypoglycemia.

MD Practice Analytics


A comprehensive suite of analytics are available to you via your own unique profile of dashboards that you are encouraged to consult on a regular basis. Comparative and longitudinal data is available to you on clinical metrics related to return visits resulting in admission and door to antibiotic times in sepsis. Operational metrics allow you to compare your practice pattern to others in the group on percentage of consult requests resulting in admission, DI usage and time to decision-making after first patient contact. Wide variation is evident in consultation and admission metrics for patients with renal colic as well. Thanks to Dongmei Wang in collaboration with Kevin Lonergan for making these dashboards available for live viewing. The information contained in these reports could serve as material for lifelong learning and self-improvement projects through the College of Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada.

Multidisciplinary Pain Management Committee

Sincere thanks to Mr. Bob Ford lead Pharmacist at the FMC and chair of the Calgary Zone Multidisciplinary Analgesia Working Group for tremendous contributions to the care of ED patients through a variety of initiatives. Bob has retired from clinical work and he will be sadly missed by all – we wish him well in this next phase.

The committee continues to meet this year with an opportunity to view the dramatic changes in practice zone-wide in the use of opioids (morphine to hydromorphone) and mitigated dosing for ondansetron especially in the elderly. A number of exciting initiatives on the committee's agenda for this year including a second look at parenteral ketorolac, femoral nerve blocks for hip fractures and increased use of intra-lesional therapy for specific conditions such as supraspinatus tendinitis and inflammatory arthritis as well as enhanced collaboration with pediatric emergency medicine.



 Stay tuned as well for survey requests coming from the working group gauging your feedback on the order set and looking for suggestions to further advance the care for the most prevalent complaint seen among the 300K visits to the ED annually.



Surge Response via Mobile Phone

Kudos to Dr. Baker and Kim Jessen for implanting a Zone-wide on call strategy to manage surge inflows across the 4 sites for MDs interested and willing to receive text alerts in times of high inflow and adequate patients in treatment spaces to allow MD assessments.

The system is working extremely well and offers a useful replacement for the e-mail based alerting that we have depended on until now. Inflow can be unpredictable across the four adult site and working conditions deteriorate and stress levels rise for all stakeholders when we fall behind.



Please consider responding to these text alerts if you are available to head on into the ED that is in need of your help.

Undergraduate Teaching Commendations

The Emergency Department's footprint in Undergraduate Medical Education is reaching highest levels yet at the Cumming School of Medicine. Letters of thanks and commendation have been received and logged for Drs. Catherine Patocka, James Huffman, Jessie Kao, Ayesha Khory, Geoff Lampard, Stan Mayer, Ian Wishart and Bill Wertzler. Thanks as well to Dr. Trevor Langhan for coordinating a highly successful mandatory clerkship that continues to receive excellent evaluations from CSM medical students. The program's success is only possible because of the commitment and engagement of our faculty in both bedside teaching and additional didactic sessions.

Off-Service Residents & Visiting Elective Students

Our department is greatly indebted to Dr. Matthew Erskine, supported by Judy Mackay for coordinating a wildly successful program for visiting elective students and off-service residents. Under Matt's watch U of C EM learning opportunities continue to be a major draw for medical students across Canada and beyond. Residents from a wide range of specialties acquire key skills in acute care management by working under our supervision and learn of the challenges we face as a safety net in a frequently chaotic but always decision-dense environment. Matthew is stepping down after completing many years of service in this role and we thank him and Judy for keeping the program thriving and robust.

CEDAF Update

A semi-formal group has been formed, led by Ian Walker, and charged with revisiting the proposal for a Calgary Emergency Department Advancement Fund (CEDAF). That group, consisting of Rick Anderson, Arun Abbi, Chris Hall, Dave Lendrum, Hannah Park and Grant Kennedy, are working to develop a revised proposal that will be most in line with the wishes of the greatest number of department members.



The members of the group would love to hear from anyone who would like to provide general or specific feedback. A survey will be coming around to the department members shortly to further gather information about what people do and do not want to see in any proposed fund. At this point, it is clear that contributions will be voluntary, but we are hopeful that we will be able to develop a fund that appeals to large majority of the department members.



Ultrasound Update

Calgary Emergency Department Ultrasound continues to move forward with several initiatives as we move into the fall. Expanded EDE courses are being taught to residents and faculty outside of emergency medicine and new machines and equipment are being procured for PLC and FMC.



Q-path™ a point of care ultrasound image/video repository is in its final stages of being set up and will be launched to the staff and residents in November. This powerful tool will allow for fantastic ultrasound teaching, quality assurance and provide an avenue for continued education. We're also working collaboratively with ICU, IM and trauma to develop a repository for high quality ultrasound tutorials and online learning modules to facilitate teaching of a broad range of ultrasound topics.

Research Update

The research program would like to welcome Heidi Boyda to the team as a research coordinator. Heidi joins us after a postdoctoral fellowship with the clinical pharmacology group at UBC. Heidi and Tiffany Junghans will be spearheading the administrative activities and day-to-day operations of the research program.

Exciting new studies beginning this fall include a randomized controlled trial of procainamide vs. electrical cardioversion for acute symptomatic atrial fibrillation as well as the CRASH-3 study examining the efficacy of tranexamic acid in severe traumatic brain injuries. Dr. James Andruchow continues to lead a validation of rapid-rule-out strategies for acute MI using high-sensitivity troponins. Dr. Grant Innes will be leading a project implementing a bedside ultrasound-based pathway designed to reduce CT imaging in suspected renal colic, and another project designed to predict outcomes and potentially reduce the uniquely high admission rates seen in the Calgary Zone.

This fall will also see the roll-out of the PRIHS I projects aiming to improve the appropriateness of CT imaging in minor traumatic brain injury and suspected pulmonary embolism, and the PRIHS II project to improve evidence-based care dispositions for patients with non-variceal upper gastrointestinal bleeding. Project manager Daniel Grigat and Catherine Joseph are playing critical roles as managers and coordinators respectively on these projects.





Upcoming Events



Department Retreat – Monday, November 09, 2015 - Lynx Ridge Golf Course - Guest Speak Dr. David Keegan

Be sure to RSVP for this year's retreat primarily but not exclusively for the physicians in our department. The event will be held at the Lynx Ridge Golf Course and is slated to run the whole day though partial attendance is encouraged if a full-day commitment is not possible. While discussions will be minuted and presentations disseminated the retreat seeks your input on key issues. Guest speaker for this year's event is Dr. David Keegan the new Associate Dean for Faculty Development. David will present a talk on learning styles in the clinical setting a presentation that offers a small glimpse into the program offerings at the Office of Faculty Development. Agenda is forthcoming but please consider proposing any specific topics to your site or academic leads.

CaRMS Interviews

- **CCFP Program – Thurs, November 26, 2015 (MATCH Day – Thurs, Dec 17)**
- **FRCPC Program – Wed, Jan 20, 2016 (MATCH Day – Wed, March 02)**

Residency Retreat – January 08 to 10, 2016 - Delta Lodge at Kananaskis

We are looking forward to having another fun-filled weekend and taking an opportunity to discuss all things related to the residency programs. Historically this has been a great time for staff and residents to share. Family members and children are encouraged to come out and enjoy the weekend as well. We would love to have a great staff turnout this year. We are planning a special session on "Incorporating Competency Based Education into Your Clinical Teaching".

- Keep your eyes on your inbox for a sneak preview of the events and further details.

Research Day – Thurs, April 07, 2016 - Foothills Auditorium

Emergency Medicine Research Day will be hosted in the Foothills Auditorium on Thursday, April 7th, 2016. This event showcases the work of local Emergency Medicine nurses, residents and faculty by providing the opportunity to share their research projects with members of the Cummings Faculty of Medicine and other interested health professionals, including Family Physicians, in particular those practicing in Urgent Care. Research Day is intended for all health professionals with an interest in Emergency Medicine.



If we've overlooked something, or you wish to have content added to the next edition,

please contact Judy Mackay

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