

The DEMOCRAT

Autumn 2016

DEPARTMENT OF EMERGENCY MEDICINE
OPERATIONAL CLINICAL RESEARCH & ACADEMIC TABLOID



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🍁 Upcoming Public Health Presentation – October 20th, 2016

The University of Calgary is hosting an exciting Grand Rounds presentation and afternoon workshop by Johns Hopkins' Dr. Daniel Barnett on Preparing for Emergent Public Health Crises. Daniel Barnett (MD, MPH) is an Associate Professor in the Department of Environmental Health and Engineering at the Johns Hopkins Bloomberg School of Public Health and is Principal Investigator of the HRSA-funded Mid-Atlantic Regional Public Health Training Center at Johns Hopkins. His research interests include evidence-based approaches to enhance public health emergency preparedness, response, and recovery systems. His presentation at Grand Rounds on Thursday, October 20th from 9:00am to 10:00am will focus on the preparation of health care providers when coming to work during health crises such as Ebola, the Zika virus, etc. He will also be conducting a three hour workshop on the same topic on the afternoon of October 20th. There are still a few spots left for the workshop and if you would like to attend please let Brittany know by Wednesday, October 19th. (Brittany.ozar@albertahealthservices.ca)

🍁 CPT Section Update

The latest Section interest group meeting was held on September 6. At that meeting we discussed the Royal College CPT residency proposal in detail. Dr. Lucyk will be updating the proposal and submitting to the PGME office later this fall. PGME will obtain a letter of support from the AHS Chief Medical Officer and then submit to Alberta Health on our behalf before the end of 2016.

In July, CPT and DEM members had a productive meeting with Alpha House staff to discuss opportunities for collaboration in education and research into care of vulnerable populations. PADIS staff members will work with Alpha House staff to coordinate a series of educational sessions on toxidromes and substance withdrawal as part of our outreach program.



🍁 2016 Gala Night

The 2016 ED Awards Gala was another incredible success! 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 Calgary Refugee Clinic, 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.

The Nominations and Winners from the evening were as follows:

ACH

Michel Bjornson - winner
Jonathan Guilfoyle
Sarah McPherson
Rookie – Shirmeem Doshi

PLC

Cathy Dorrington
Gavin Greenfield
Lester Mercuur - winner
Rookie – Puja Chopra

SHC

Ryan Courmier
Chris Rebus
Phil Ukrainetz - winner
Rookie – Arthur Tse

Humanitarian:

Don Bethune - winner
Scott Faquharson
Stan Mayer

FMC

Cathy Dorrington - winner
Lester Mercuur
Stuart Rose
Rookie – Erik Saude

RGH

Aaron Johnson
Jame Huffman - winner
Stuart Rose
Rookie – Jason Mitchell

Mike Hodsmann:

Shawn Dowling
Roger Gailbraith
Bryan Young - winner

Long service

award/retired this year:
Willy Kalmanovich
David Johnson
Tim Lavens
Bill Wertzler

🍁 Ultrasound Update

Calgary Emergency Department Ultrasound has been quite active over the past year with several initiatives seen through to completion. There were several successful EDE I and II courses over the past year for both staff and residents. Our junior ultrasound block and senior ultrasound curriculum have been successfully implemented. We are arranging interdisciplinary ultrasound rounds with Emergency, ICU, Trauma and Internal Medicine to occur every other month for the academic year. During these rounds we review interesting/complex cases that have been saved to Qpath which highlight the role that point of care ultrasound played in the care of our patients. Kasia Lenz has successfully completed her focus year in point of care ultrasound. Paul McKenna and Jibrán Sharif will be our next ultrasound “fellows”. We will also be working toward getting all of staff physicians EDE I certified in the near future.





FRCP Education Update

We are pleased to announce the successful completion of training for our R5 residents from the 2015-2016 academic year. Our incoming group R1 of residents have been a fantastic addition to the program. They are Kelsey Ragan, Katie Anker, Ryan Wilkie and Ryan Allen. Please welcome them in the department.

This past year we have been working with the Royal College Specialty Committee on the change to Competency by Design (CBD). Emergency Medicine is scheduled to start CBD in 2018. In anticipation we have redesigned the daily encounter card to confidence scales of clinical tasks and have formalized our point of care direct observation requirements of trainees while on clinical shifts.



ARP Update


With thanks to Scott Banks and input from both the Physician Executive Committee and Academic Steering Committees the Calgary Emergency Medicine Expression of Interest application for an alternative relationship plan was approved for consideration to the next step in the development and approval process. The proposal calls for the creation of a number of new positions with salary support to pursue a variety of extracurricular areas of niche expertise and leadership in both the clinical and academic realm. The proposal and motivation to pursue an ARP for the department stems from knowledge of its potentially transformative nature as witnessed through our Peds EM colleagues, 7 of whom are in the ARP but with all members benefiting through teaching programs and other benefits. The next stage of vetting occurs in Edmonton on October 28th where a provincial steering committee will decide if Calgary EM moves ahead in developing a full proposal.

University of Calgary EM



There will be some changes on the different Emergency Medicine websites to reduce redundancy of information. This will create better updated websites and this change should make it easier for users to find information they are looking for in a timely manner.

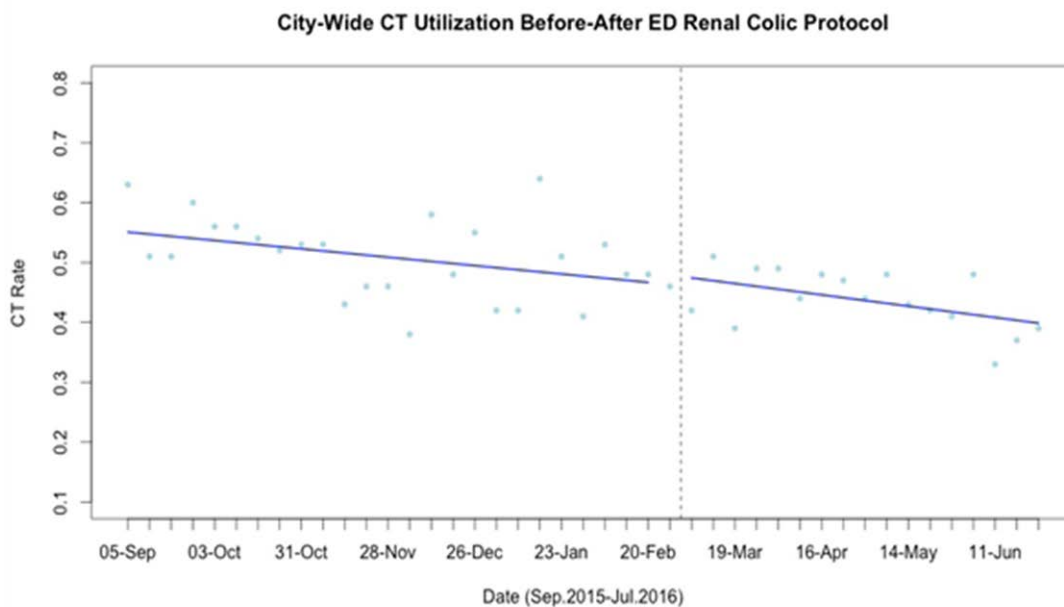


 Stay tuned as well for survey requests coming from the working group gauging your feedback on communication preferences within the department.



Renal Colic Protocol Summary

The renal colic protocol process began in Nov of 2014. It was developed during the first half of 2015, regionally approved late in 2015, and implemented across all 4 Calgary sites between March and June of 2016. Our evaluation shows that CT use for patients with a discharge diagnosis of renal colic fell from about 65% in 2014 to 40-45% currently. The data suggest that protocol implementation at SHC was temporally associated with a 23% reduction in CT use (kudos to SHC); however, the time series plot below suggests, at a zone level, that the reduction in CT may have little to do with the actual protocol implementation, and the 2 (only 2) phone calls I have received from patients suggests to me that docs are not handing out the renal colic patient education packages (my cellphone # is on the bottom of the info sheet).



Whatever the reason for the improvement (best estimate=500 fewer scans/year) it would be great to try and sustain this, so the next time you see an uncomplicated renal colic patient, continue to think twice about whether a CT will lead to a better outcome for your patient. The protocol is available as a link from the renal colic order set and, at least at RGH, hard copies with patient education packages) are sitting on the desk at the intake workstation.

More information on the study can be found in email [PDF](#) attachment.





PTT/INR Project Update

As you recall, the first part was the removal of the bundled PTT/INR from the ED RN Chest pain OS, as well as educating the physicians about the futility of PTT/INR in routine ? cardiac chest pain patients. This took place between May -Aug 2015. As you can see from the table, this resulted in a reduction of 8412 PTT or INR's.

	# of INR/PTT's from EDRN SCCP Order Set
Pre-Intervention	4982 INR and PTT's
Post-Intervention	776 INR and PTT's
Reduction in INR and PTT's	-4206 (84% reduction) (8412 fewer tests)

Phase 2 involves systematically going through the most common order set and determining whether PTT and INR should be bundled (as is necessary in certain clinical scenarios to ensure safe and timely care) or whether they can be unbundled or either/both component removed (if they do not add any value). In order to not overwhelm the SCM team, we have been doing this in chunks of order sets - starting with the 10 most commonly used OS and working our way through all 197 ED order sets (sigh!).

Here are the results of the first batch of unbundling.

Pre - Unbundling (PTT and/or INR)	25167	Feb 2016 – May 2016 (90days)
Post - Unbundling (PTT and/or INR)	12292	May 2016 – Aug 2016 (90days)
Reduction in INR or PTT	12875	

This is in addition to the reduction we saw in Phase 1 (which have stayed at the post-intervention level). As you can see the vast majority of the reduction is driven by fewer PTT's ordered.

This is a very dramatic reduction and reflects an improvement in appropriate usage of coagulation studies in the ED. We have just reviewed the next 20 order sets and are planning on painstakingly going through all 197 order sets- stay tuned for most exciting results in 6 mths or so! Congrats to all involved!

Excel Sheet with all of the data can be found in email Excel attachment.



Upcoming Events



 **Department Retreat – Wednesday, October 26, 2016**
- Lynx Ridge Golf Course

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. This year's retreat will be much more interactive so come prepared to give your input. The agenda and other details have been sent out, so please ask if you have not received that information yet. We look forward to seeing you all there!

 **Residency Retreat – February 10 to 12, 2017**
- 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. The theme this year is "Physician as Coach" and we are hoping to offer some high impact sessions for staff.

- Keep your eyes on your inbox for a sneak preview of the events and further details.
- Also, the entire department would like to extend a big Congratulation to all eight residents who passed their exams this season!



 **Research Day – Thursday, April 13, 2017**
- Foothills Auditorium

Emergency Medicine Research Day will be hosted in the Foothills Auditorium on Thursday, April 13th, 2017. 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 Brittany Ozar

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