

# Emergency Department Update

Friday, April 14, 2023

Issue # 141

## GENERAL

### STROKE SURVEY

In response to The Joint Commission findings during the Stroke survey, a few changes were made to help with stroke patient documentation.

The citations were around:

- 1) PO meds documented on patients with a feeding tube and NPO diet order
- 2) Blood pressure parameters being different in various places in the chart (e.g.: NIR provider note vs. NCC admit order “Notify Provider” parameters vs. nicardipine titration parameters)
- 3) Vital Signs and Neuro Assessments not done per guidelines post intervention (i.e. ischemic stroke patients post tPA or embolectomy)

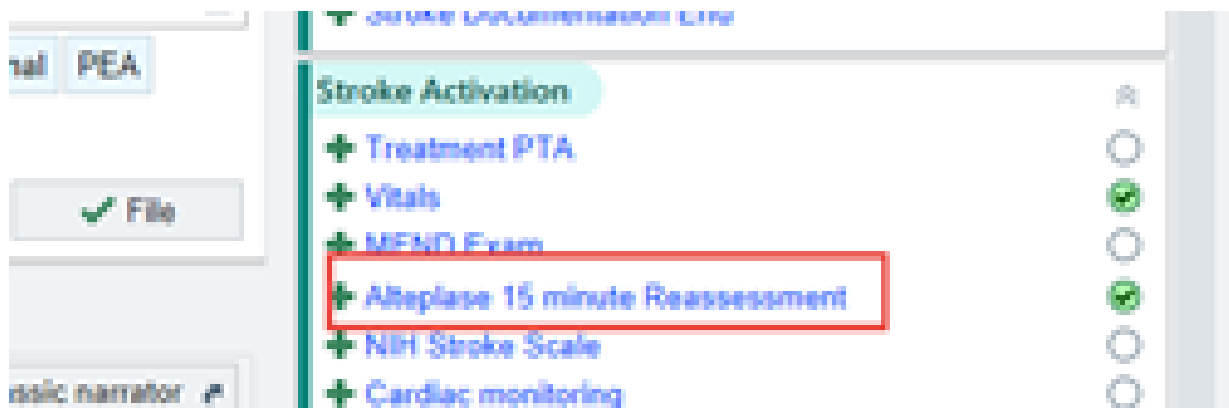
The corrective actions includes Epic changes and increased monitoring, but the stroke program **also need your help**.

Changes that have been made:

- BPA instituted that fires if provider tries to order PO med for NPO patients with feeding tube
- Critical Care ischemic stroke admission order sets updated
- NIR post procedure orders updated
- Increased monitoring of appropriate order set use and route of administration orders
- Audits of VS/NC on all stroke patients post tPA and/or embolectomy

### How you can help:

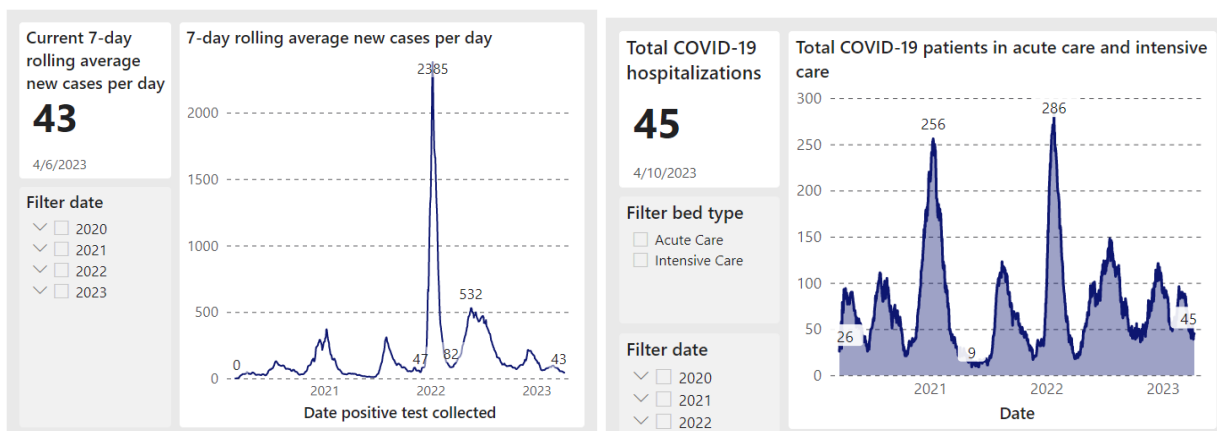
- Use the badge buddies for MEND help, BP goal reminders, and monitoring frequency reminders
- Try using the new flowsheet option for documenting the Vitals + GCS/Pupils/MEND (Under “Alteplase 15 min reassessment”)



## HOSPITAL COVID SURGE LEVEL

- As of Friday, April 14, 2023 we have **13** COVID positive hospitalized patients at ZSFG putting us at a Hospital Surge Level of **YELLOW**

## COVID-19 CITY WIDE DATA



Last week's number: 39

Last week's number: 43

## EDUCATIONAL OPPORTUNITIES

### PEM PEARL #1

Dina Wallin, MD, FACEP, FAAP

Authors of a [brand-new study](#) out of Australia explored the use of **POCUS** for **urine collection in non-toilet-trained kids 0-36 months**. There are so many morsels of wisdom in this paper!

- This institution's standard of care for well-appearing kids is to remove the diaper, prep the area, and give parents a urine cup, telling them to be vigilant and get a **clean-catch** sample! This isn't even incorporating [bladder stimulation](#).
- The experimental arm did this, and also did a bladder scan at the same time-- if the child had  $\geq 7$  ml/kg urine in the bladder, caregivers were warned that urination was imminent; if not, **PO fluids** were encouraged and the child was re-ultrasounded in 30 minutes.
- POCUS mean time to sample was 52 minutes**, median 40 minutes; **control group mean time 82 minutes**, median 55 minutes. This was statistically significant, and also *clinically* significant-- 30 minutes is a long time when waiting with a child in the ED!
- Unsurprisingly, the clean catch method **works faster in younger infants**.

So, lots to digest here. We are working on developing a **urine collection workflow** to streamline our care, and in the meantime-- seems as if **clean catch** may be a viable option, +/- with **bladder stimulation**. **POCUS** is a very helpful adjunct. I also think **POCUS prior to cath**

**attempt** makes a lot of sense-- with a clean catch cup nearby in case the ultrasound itself stimulates the bladder!

If you decide to try any of this out, please LMK how it works! 😊

## PEM PEARL #2

A [recent study](#) demonstrated that, in a large pediatric ED with a patient population similar to ours, **Spanish-speaking patients and families reported lower physician interpersonal skills than English-speaking families**, even after adjusting for race, income, insurance status, and education level.

Patient-rated physician **interpersonal skills and communication skills** were rated **lower** for folks who reported **longer wait times** and/or **conflict with their provider**. 🙄

This data is from *before* Covid-- so the providers in this study were able to utilize facial cues more than we can now. Although this was super nonspecific and the stats weren't the most robust, this is still an opportunity for us to improve how we communicate with patients with limited English proficiency-- offer **nonverbal cues** (a smile is still visible behind a mask, especially to a kid!), utilize **empathic statements** (like [PEARLS statements](#)), and make sure to **triple-check for understanding**.

Although we can't do much about the long wait times, we *can* improve our communication strategies! 😊

## ENPC COURSES 2023

- May 11-12 To register go to <https://May2023ENPC.eventbrite.com>
- September 14-15 To register go to <https://Sept2023ENPC.eventbrite.com>
- November 2-3 To register go to <https://Nov2023ENPC.eventbrite.com>

## CELEBRATIONS/ANNOUNCEMENTS

### CELEBRATIONS

Send me your celebrations ([david.staconis@sfdph.org](mailto:david.staconis@sfdph.org)) that you would like included in the ED Updates and I will share them here.

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Amazing **job Jessica Seivane MEA** on 4/12 NOC Shift! Pod C was so impressed and praised how hard you worked!! ~**Rob Alvernaz, Charge Nurse**

Shout out to Team Lead **Sarah Dice-Goldberg, RN** for managing a challenging day in Resus on 6/6. Resus was overflowing with 16 patients for half the day with sick and behavioral health patients from the waiting room and EMS. Flow was challenging that day, but she managed to keep the department functioning. Nice job. ~**Anne Keating, RN**

I wanted to reach out to share my appreciation for **Vanessa Jean-Louis, RN**. She and I worked together to care for a complex pediatric patient. Vanessa went above and beyond in her care for

this child - she had kind, compassionate, bedside manner, and worked very hard to develop rapport with the child throughout the day. Even though the pod was very busy, she somehow always made the time for frequent check-ins, assessments, and updates. I am very grateful that she was part of this child's care team! ~**Ashley Foster, MD**

Shout out to **Noel Bartholomew, RN** and **Julia Cotteral, RN** for some outstanding stroke care documentation. Great job guys! ~**Tristen James, RN Stroke Program PI Coordinator**

Great job **Derrick Miller, RN; Ali Ragheb, RN** and **Lily Gong, RN** for taking great care of a sick neonate that went to the NICU! ~**Rob Alvernaz, Charge Nurse**