NP/PA MEETING MINUTES FRIDAY AUGUST 22nd, 2008 12:30-2:30PM EVANSTON EMERGENCY DEPARTMENT

Present:

Sue Bednar
Ali Atwater
Kurt Ortwig
Kelly Devonshire
Myriam Riboh
Marlene Angelico (working)
Julia Strobel (OOT)

I. The Numbers

| July 2008 | Total #2008 | Total #2007 |
|---------------|-------------|-------------|
| | | |
| Evanston | 999 | 801 |
| Glenbrook | 792 | 787 |
| Highland Park | 516 | 428 |

II. Updates by place

- A. **Evanston**: high volume: great teamwork
- B. Glenbrook:
 - 1. Still need to work on communication between NP/PA and MICN nurses:We continue to get ambulance runs with no "heads up " about their arrival.
 - 2. RN assigned to FT: works well when there is one assigned
 - 3. Fast track patients are definitely waiting longer to be seen when main room patients are in FT
- C. **Highland Park**: computer moved (thank you Kevin and Marlene) to team I
 - 1. Mondays at EV-the 10-8 shift: no one is able to leave on time-most say until 10PM: too busy to leave at 8pm. SueB will f/u with Marge /Jeff
- III. **Rush North Shore Update**: discussions between staff at EV and staff at RNS have begun: SueB will keep all UTD on details as they become available
- IV. **JCAH update**:
 - A. No word yet about exactly "when" but could be any day now
 - B. More reminders:
 - 1. Patient identifiers (name and DOB)
 - 2. Hand hygiene (wash your hands before entering and after leaving a room!!)

- C. Need to know what you would do in the first 5 minutes of suspected bio/chemical exposure (emergency preparedness)
- D. QI/Core measures: we review charts for pain assessment /intervention Also- we are part of the Sepsis goal directed therapy which means recognizing early signs of sepsis, ordering aggressive fluid, and antibiotic administration within the first hour. Sue B will e-mail sepsis meeting minutes to all. **Cliff notes?** ENH mortality rate dropped by 24 % in the last quarter-so we are moving in the right direction with this
- E. On the unit: Do not leave open meds out: cabinets containing suture material, needles, syringes must be locked
- F. More "reminders' to come-will re-send "tip sheet" early next week

V. New ED website:

The ED has a new website and we—thanks to Geri-get to rent some space there!! Please check out the new website at www.enhemergency.com.

On it you will find a link to "NP/PA Education"
This link will lead you to a page with 4 discrete sections:

- 1. **Related links**: this is meant as a place where any of you can post links to pertinent information for our group (ie AANP, AAPA, ACEP life long learning articles, etc)
- 2. **Practice pearls**: again –another section where we need your input into everyday bits of information that you have learned and would like to share with others
- 3. **Article of the week**: A place to post what you are reading (Ali will be soliciting your input: SueB posted the first one for all to have a look at)
- 4. **NP/PA education**: this is where you will be able to find the monthly readings from Tintanelli

I will post meeting minutes and dates for the next staff meeting on this site as well, however-we will continue to communicate as have (via email) for day to day important information

Finally this website requires all of you to be active participants: we need input from all of you (what you're reading, what you've learned) so that we can all learn from each other!!

To begin with-please send all your links, and/or articles/pearls in an attachment to SueB/Ali so that we can upload

VI. EDUCATION for the upcoming year:

We will be focusing more on more "mainroom" topics:

The format will be as follows:

At the beginning of each month you will find reading materials on the NP/PA education link of the website (feel free to add to it if you have a great article/resource)

We will schedule a monthly "session' of case study reviews on that topic with one of the ED attendings (yes-some bribery/groveling will be involved) that will coincide with out staff meetings.

We are fortunate to have permission of Dr. Vicki Keough to use her curriculum from the graduate ED course she teaches to use as our outline.

In addition: here are some of the topics that were suggested at the meeting:

- 1. Case presentation skills: "just the facts" in 3 sentences or less
- 2. Fever/Sepsis
- 3. mental status changes
- 4. Psych patients: what do you need to include in a medical clearance"
- 5. opthamology review
- 6. Stroke/CVA/Neuro emergencies
- 7. Dermatology:
- 8. Management of traumatic injuries
- 9. Cardiovascular emergencies
- 10. Respiratory emergencies
- 11. Abdominal emergencies
- 12. Environmental emergencies
- 13. Immune system disorders
- 14. Toxicologic disorders
- 15. Obstetric and GU emergencies
- 16. Peds emergencies: trauma, cardio, abdominal, GU

Physical assessment, pertinent labs/diagnostics, plus differential diagnosis will be included as past of every topic.

VII. Chart Review:

One of the last things we talked about –but in the world we live inprobably one of the most important- is documentation.

And this is a fitting time to talk about just how we would like to accomplish this.

It comes at a time where the corporate goal of using EPIC to help us follow "best practice" guidelines is moving right up front.

As we improve in our abilities to manage sicker patients, review of documentation is the tool we can use to make sure that we all "get it". We will be talking more in weeks to come about how to accomplish this.

It will involve us peer reviewing charts-again so that we can all learn from each other.

BOTTOM LINE:We've got lots of work to do but it's going to be a great year!!!