

LKS Current Awareness Bulletin

Accident & Emergency Oct - Dec 2019

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A current awareness update service from Library and Knowledge Services. If you know anyone who could benefit from receiving this please ask them to sign up by emailing

clare.morton@elht.nhs.uk or library.blackburn@elht.nhs.uk

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I hope this bulletin is useful. We are keen to promote our services at your team meetings/huddles. If you feel that this would be useful, then please contact me to arrange a brief induction to how we can support you in education and training, researching for information, literature support, critical appraisal skills, free article requests, social media training (learn to Tweet!) and much much more. Kind regards

Abbas

Abbas Bismillah, Head of Library and Knowledge Services

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In the News

[Sepsis death: A&E 'should have been warned' of patient](#)

Paramedics should have warned A&E staff that a severely ill woman, who later died from sepsis, was on her way to hospital, an inquest has heard.

Source: BBC News

[Official measures 'hide the true scale' of 12 hour hospital waits](#)

Royal College of Emergency Medicine finds huge discrepancy in way patient arrivals are recorded in England compared to rest of the UK

Source: iNews

[Clinical standards review data shows 'initial steps in the right direction](#)

Responding to the publication of a [progress report from NHS England on the Clinically-led Review of NHS Access Standards](#), President of the Royal College of Emergency Medicine, Dr Katherine Henderson said:

“The publication of some data from the pilot sites is very welcome, but it’s too early to draw strong conclusions given the short duration of the testing period.

Source: RCEM

[RCEM Election Manifesto outlines actions for the next government to help A&Es after worst ever performance figures](#)

In response to data for October that shows A&E performance at its worst ever level, the Royal College of Emergency Medicine has launched its election manifesto that outlines what must be done to repair Emergency Medicine

Source: RCEM

Latest RCEM data shows true scale of the number of patients waiting longer than 12 hours in A&E

The first publication of data from [the Royal College of Emergency Medicine's 2019-20 Winter Flow Project](#) shows that existing data does not reflect the true scale of the problem of 12 hour stays in A&E.

[How to pass the emergency OSCE station](#)

[Costs and effects of interventions targeting frequent presenters to the emergency department: a systematic and narrative review](#)

[What are emergency ambulance services doing to meet the needs of people who call frequently? A national survey of current practice in the United Kingdom](#)

[Stakeholder opinion on the proposal to introduce 'treat and referral' into the Irish emergency medical service](#)



If you are accessing any link outside of the ELHT network please use your NHS Athens username & password to access <https://openathens.nice.org.uk/>

Self-harm presentations in emergency departments: staff attitudes and triage.

Author(s): Masuku, Sithandazile

Source: British Journal of Nursing; Dec 2019; vol. 28 (no. 22); p. 1468-1476

Publication Date: Dec 2019

Available at [British Journal of Nursing](#) - from MAG Online Library

Abstract: Addressing the rising incidence of self-harm and the demand this places on emergency departments (EDs) are UK Government healthcare priorities. A history of self-harm is linked with suicide risk, so self-harm is a public health issue. The ED is the first point of contact for many people who self-harm so it plays a pivotal role in access to services.

Database: CINAHL

Factors impeding the effective utilisation of an electronic patient report form during handover from an ambulance to an emergency department.

Author(s): Altuwaijri, Eman A; Budgen, David; Maxwell, Sharyn

Source: Health Informatics Journal; Dec 2019; vol. 25 (no. 4); p. 1705-1721

Publication Date: Dec 2019

Available at [Health Informatics Journal](#) - from Unpaywall

Abstract: We investigated the reasons why the transition from paper to electronically formatted records during patient handover between ambulance crews and emergency department staff in a North East England Emergency Department has not always been viewed positively.

Database: CINAHL

From Grenfell to Manchester Arena: supporting the health of medics on the front line.

Author(s): Paton, Nie

Source: Occupational Health & Wellbeing; Dec 2019; vol. 71 (no. 12); p. 16-19

Publication Date: Dec 2019

Available at [Occupational Health & Wellbeing](#) - from ProQuest (Health Research Premium) - NHS Version

Abstract: The article focuses on the emotional and mental cost associated with of being on the medical front line. Topics include risk of work-related stress, burnout and depression; supporting doctors in crisis with issues relating to a mental health concern or addiction problem; and the impact of work pressure on health of medical professionals.

Database: CINAHL

Will the winter of 2019/2020 have unusually high service demand? Part 1: Lessons.

Author(s): Jones, Rodney P

Source: Journal of Paramedic Practice; Nov 2019; vol. 11 (no. 11); p. 492-494

Publication Date: Nov 2019

Available at [Journal of Paramedic Practice](#) - from MAG Online Library

Database: CINAHL

The prevalence of wholly attributable alcohol conditions in the United Kingdom hospital system: a systematic review, meta-analysis and meta-regression.

Author(s): Roberts, Emmert; Morse, Rachel; Epstein, Sophie; Hotopf, Matthew; Leon, David; Drummond C.

Source: Addiction; Oct 2019; vol. 114 (no. 10); p. 1726-1737

Publication Date: Oct 2019

Available at [Addiction](#) - from Wiley Online Library Medicine and Nursing Collection 2019 - NHS

Abstract: The prevalence of alcohol-related conditions is often reported as higher in hospital in-patients compared with the general population. However, formal prevalence estimates are commonly derived from small studies which report highly varied results. This systematic review and meta-analysis, within the UK hospital system, aimed to estimate the pooled prevalence of the 26 ICD-10 conditions that are wholly attributable to alcohol in in-patient settings.

Database: CINAHL

Urgent and emergency care: patient safety and quality issues.

Author(s): Tingle, John

Source: British journal of nursing (Mark Allen Publishing); Nov 2019; vol. 28 (no. 21); p. 1426-1427

Publication Date: Nov 2019

Available at [British journal of nursing \(Mark Allen Publishing\)](#) - from MAG Online Library

Abstract: John Tingle, Lecturer in Law, Birmingham Law School, University of Birmingham, discusses the Urgent and Emergency Care Patient Survey and a recent Supreme Court case on waiting times in A&E.

Database: Medline

A Multifaceted Intervention to Improve Patient Knowledge and Safe Use of Opioids: Results of the ED EMC2 Randomized Controlled Trial

Author(s): McCarthy Danielle M; Curtis Laura M; Cameron Kenzie A. et.al

Source: Academic Medicine; Dec 2019; vol 26. (12); p 1311 - 1325

Publication Date: Nov 2019

Available at <https://doi.org/10.1111/acem.13860>

Abstract: Despite increased focus on opioid prescribing, little is known about the influence of prescription opioid medication information given to patients in the emergency department (ED). The study objective was to evaluate the effect of an Electronic Medication Complete Communication (EMC2) Opioid Strategy on patients' safe use of opioids and knowledge about opioids.

Cardiac arrest in the intensive care unit: An assessment of preventability

Authors: Ari Moskowitz, Katherine M. Berga, Michael N. Cocchib et al.

Source: Resuscitation; Dec 2019; Vol 145, p 15–20

Publication Date: Dec 2019

Abstract available at [https://www.resuscitationjournal.com/article/S0300-9572\(19\)30607-0/abstract](https://www.resuscitationjournal.com/article/S0300-9572(19)30607-0/abstract)

[Request full text article from the library](#)

BET 1: What is the incidence of cardiac arrhythmia in adult patients with acute infection prescribed fluoroquinolones?

Authors: Chan K, Fitzpatrick J

Source: Emergency Medicine Journal; Oct 2019; vol 36: p 635-638.

Publication Date: Oct 2019

Available at <https://emj.bmj.com/content/36/10/635.2.full>

Abstract: A shortcut review was carried out to establish the incidence of arrhythmia after prescription of a fluoroquinolone antibiotic. 332 papers were found using the reported searches, of which 14 presented the best evidence to answer the clinical question.



Cochrane
Library

<https://www.cochranelibrary.com/>

Primary closure versus delayed or no closure for traumatic wounds due to mammalian bite

Soumyadeep Bhaumik, Richard Kirubakaran, Sirshendu Chaudhuri

6 December 2019

Prophylactic antibiotics for penetrating abdominal trauma: duration of use and antibiotic choice

Philip J Herrod, Hannah Boyd- Carson, Brett Doleman, James Blackwell, John P Williams, Ashish Bhalla, Richard L Nelson, Samson Tou, Jon N Lund

12 December 2019

Decompressive craniectomy for the treatment of high intracranial pressure in closed traumatic brain injury

Juan Sahuquillo, Jane A Dennis

31 December 2019

Computed tomography for diagnosis of acute appendicitis in adults

Bo Rud, Thomas S Vejborg, Eli D Rappeport, Johannes B Reitsma, Peer Wille-Jørgensen

19 November 2019

Evaluation of the Use of Medical Scribes in VAMC Emergency Departments and Specialty Care Clinics

CLINICAL TRIAL: added to CENTRAL: 30 November 2019 | 2019 Issue 11

DynaMed® Updates

DynaMed gets you to your clinical answer faster than ever before.

Questions arising during patient care need fast answers. In DynaMed, the right information is quickly surfaced. Actionable recommendations, key takeaways, and synopses provide the quick answer with the ability to dig deeper as needed.



The screenshot shows the DynaMed web interface. At the top, there is a navigation bar with 'Specialties', 'Calculators', 'Differential Diagnosis', 'About', and 'Mobile'. Below this, the 'Specialty' dropdown is set to 'Emergency Medicine'. A list of sub-specialties is displayed with expandable arrows: Environmental Emergencies, Medical Emergencies, Orthopedics, Toxicology, Trauma, and Other Emergency Evaluation and Management Considerations.

For Updates in DynaMed go to [dynamed.com](https://www.dynamed.com)

Specialties – Emergency Medicine

Select your topic and then UPDATES

Reflective Reading Clubs at ELHT

What is a Reflective Reading Club?

A Reflective Reading Club is a regular gathering of interested people to discuss a particular topic. This will include staff, students, and volunteers; in fact anyone at East Lancashire Hospitals NHS Trust can attend. It is a really good way of meeting new people, sharing thoughts and opinions.

This is how the Reflective Reading Club works:

Individual Learning – 1.5 hours CPD

1. You let us know you are interested.
2. We send you a short journal article and a small checklist of points to consider when reading it. Make notes as you read the paper in your own time and this earns you one and a half hours CPD time!

Participatory Learning – 1.5 hours CPD

3. We meet for the club and discuss the article in a small group, reflecting on points whilst working our way through the checklist. Any notes that you make on the checklist can be submitted into your portfolio as evidence of reflective activities – this earns you another one and a half hours CPD time!
4. YOU GET A CERTIFICATE of participation and attendance!

If you would like to learn how to facilitate or are interested in facilitating a Reflective Reading Club please contact:

Abbas Bismillah

Head of Library and Knowledge Services

Email abbas.bismillah@elht.nhs.uk

01254 784308 (Ext: 84308)

[Find out about our upcoming Reflective Reading Clubs](#)



Library staff can help you to set up and facilitate a regular Journal Club.

We can help you search for suitable articles and offer advice on critical appraisal.

A journal club can

- Help develop critical appraisal skills
- Provide you with CPD hours to help you with your Medical, Nursing or Midwifery revalidation
- Encourage evidence based medicine
- Help people to learn and improve their critical appraisal skills
- Promote awareness of research skills
- Encourage use of research
- Support continuing professional development
- Promote social contact
- Provide continuing medical education
- Stimulate debate and improve understanding of current topics
- Encourage quality improvement initiatives



Here's Patrick, our Clinical Librarian at the Neurological Rehabilitation Journal Club discussing "Outcomes of hospital admissions among frail older people: a 2 year cohort study"

For further information please contact Abbas Bismillah, Head of LKS on ext. 84308 or email abbas.bismillah@elht.nhs.uk or contact Patrick Glaister, Clinical Librarian at patrick.glaister@elht.nhs.uk

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*Did you know... that we have staff who can help support you in finding the evidence for **General Interest and Personal Development**, **Writing for Publication and Presentation**, **Research or Assignment**, **Education and Training**, **Evidence Based Practice for Patient Care**, **Service Management**, **Up-to-date Protocols and Guidelines**. **If you require a literature search, then please do ask us. We can save you the time. Please share with your colleagues***

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Please visit our website for more information

www.ehub.elht.nhs.uk

Take a look at our Library Guide and latest Library Alert for highlights all the services that we offer.



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