

December 2007

Research Projects Update

Sepsis Study – The sepsis study in the Central Region will be starting January 3 at 00:01 and will continue until July 3rd at 23:59. Look for posters in the holding area at the Q and at Central bases for more info. EHS has a red research drop off box for the paramedic scoring sheets located beside the ED's blue box. The EHS sepsis team is available any time if you have questions now, or any time during the study: They are: John Kasemets, Kevin Carey, Jan Jensen, Scott Sturgeon, Gredi Patrick and Andrew Travers.

Jeff Fraser is teaming up with Gredi Patrick, Andrew Travers and Carmen D'Angelo an EMS Manager from Ottawa on a study titled "Which Patient Priority System is best for Ontario? A comparison of two medical priority dispatch systems". Stayed tuned for updates!



Research and Other Education Opportunities

CDHA Research Ethics Education Sessions

The Fundamental of Research classes are still going on at the QEII in the Royal Bank Theater. The sessions are teleconferenced around the province. In total, there are 8 sessions, but if you attend at least 5, and pass the test at the end of the sessions, you will get a certificate. This is a great way to get CEU's as well! Upcoming dates are: Jan 10, February 7, March 6, April 3 and May 1.

Certificate in Research Ethics Education

Tri-Council Policy Statement Certificate Tutorial:
<http://www.pre.ethics.gc.ca/english/tutorial/welcome.cfm>

Tissue Donation Education Session: This is an invitation for you to attend an information session at the Royal Bank Theater at the HI Site at CDHA at 12:00 on January 22nd. The session is based on a donor Mom giving her perspective and experiences participating in the donation process. It is a very inspiring talk, don't miss it!



Research 'Road Show'



Contact us if you would like us to attend an M & M in your area! We are happy to talk about an area of interest involving research, include a review of an article, or discuss a project with the paramedics at the base.



Research Radar

If you are interested in receiving emails about educational events, upcoming conferences, or abstract submission dates, please contact Emily at 902-424-2702. Happy to help!!



Congratulations!

Congratulations to Dr. Natalie Yanchar on her front page debut article on the safety of children helmet use in the Nova Scotia Health Research Foundation Newsletter. Please see details about her work on page 25 titled: "What we don't know about traveling with children". The evidence derived out of the research resulted in a change in practice. This is a fine example of Knowledge Translation where research based evidence led to creating public awareness of current practices regarding use of booster seats. Evidence translated to knowledge led to Nova Scotia becoming the third province in Canada to adopt booster seat legislation regarding appropriate car seat and booster seat use, ensuring the safety of children when traveling in vehicles. Please see <http://www.nshrf.ca/AbsPage.aspx?ID=1041&siteid=1&lang=1> for the details. Congratulations to Natalie and her team!

Congratulations also to Jan Jensen and Gary Murphy on their pieces in the October/November issue of the Canadian Emergency News newsletter. Jan talked about research design and Gary described the EMS coverage at Tall Ships Festival. Well done Jan and Gary!

Kudos to Neil Mooy who represented EHS on Nov. 20th as a partner in research with the Mental Health Mobile Crisis Team in a study called 'Evaluation of an Integrated Mobile Crisis Intervention Service' at the Sixth Annual Conference on Police/Mental Health Liaison, titled 'Psychiatrists in Blue: Building on Success'. The conference was well attended, and Neil provided insight into the dispatch process as an important component of this study.




The Educated Active Research Consumer

The Educated Research Consumer - The Passive Consumer -

"Anyone who stops learning is old, whether at twenty or eighty. Anyone who keeps learning stays young." - Henry Ford

In our last installment of "The Educated Research Consumer" we explored ways that you can stay current by actively seeking out the latest evidence to support your practice. You may have read this and said "But I really do not have the time to constantly go looking for the latest and the greatest literature – Are there other ways for me to keep on top of things?" Well, I'm glad that you asked! In fact, constantly searching journals and web sites is not for everyone, and that is ok. Not everyone has that sort of time or interest; however, it is important that everyone be up to date and well informed about their practice. In this article, we will explore ways that you can be a more passive consumer – let the evidence come to you.

Electronic Table of Contents (eTOC's) – Nearly all of the major journals have an eTOC service. This is a free service where you enter your email and an electronic table of contents is delivered to your email every time a new issue of the journal is published. These emails contain links for each article which you can click to take you to either the abstract or, sometimes, the full article. This is a great “set it and forget it” way of keeping up with your favorite journals.

Really Simple Syndication (RSS) Feeds – By subscribing to an RSS feed, you can use a program called a “feed reader” to have information delivered directly from sites to your desktop. Nearly all major news sites have a “health” or “medicine” section. Additionally, many major journals now offer RSS feeds as well. There are many free feed readers out there (I use a program called *Feedreader*). You will know that there is an RSS feed available for the page if the RSS symbol  appears either on the far right of the URL box in your browser or somewhere on the page. Simply click on the symbol and your feed reader will guide you through the rest.

Google Alerts (www.google.com/alerts) – Not every journal has an eTOC, many pages do not have RSS feed, and ultimately, without a great deal of searching, you may not find many of the good sources of information out there. This is why *Google Alerts* is so cool. Essentially, you enter a search phrase, tell Google your email, and any time it finds new information related to your search phrase, it drops you an email with the links. This is a particularly good method for those who check their email at least once a day.

Medscape & eMedicine (www.medscape.com & www.emedicine.com) – Both these sites are generalist medical sites with many specialty areas. They both offer a weekly e-newsletter – registration is required, but is totally free. The newsletters show-up in your email and you can scan them for articles which catch your eye. Topics are not specific to prehospital or emergency medicine, but they are quite informative well worth the read.

Being an educated research consumer involves making sure that you put a little time into keeping up with the evidence that is going to affect you as a practitioner. Regardless of which methods you choose, it is important that you find a method or two that works for you and use it (them) to stay current. Happy hunting and happy holidays!



Terence.hawco@emci.ca

“Thinkin’ about Research”

Gredi Patrick

Tissue donation is increasingly becoming a priority to reduce patients’ waiting time to receive an organ or tissue, and bring improved quality of life to many Nova Scotian’s who endure the

frustration of waiting while living with an altered quality of life. Part of the problem is that there is a tremendous discrepancy between demand and supply for tissue and organs as a national issue. Although organ and tissue donation has traditionally been the purview of transplant services and generally the source of donors has been the responsibility of the QEII, it is quickly becoming recognized that approaching potential tissue donor families lie within the realm of paramedic practice. Paramedics are well positioned to approach families where an out of hospital death has occurred. If the individual is less than 71 years of age and does not have diffuse cancer or has not been deceased for an extended period of time, consider asking the family if they discussed tissue donation with their loved one and whether donating tissue or organs was something their loved one was interested in. The Donation cards may offer the family a choice in their grieving which they never had before. Best wishes for a peaceful holiday season, and success in the coming new year!



Gredi Patrick Office: 424-2774
patricga@gov.ns.ca



From the classroom...

David Sibley

Part of our first year medical school curriculum at Dalhousie University includes developing an understanding of the principles of Evidence Based Medicine (EBM). One definition of EBM is the use of the current best evidence in making decisions about the care of patients. The key words in that sentence are “current best evidence”. Today, the pace at which research is being done and medical knowledge is evolving makes keeping up to date with the current best evidence for the care of our patients a significant challenge. One of the facts presented to our class was, that when we start practice as physicians, we would have to read 19-20 journals a day in our chosen field in order to keep up with finding the current best evidence in the literature. Now I don’t know what your daily schedule is like, but I am pretty certain that none of us has the time to do that and still have a life!

So what can we do when we are confronted with a question for which we are unsure of the best current answer? In order to save time (and maybe our sanity), when we are seeking answers to our questions we need to be efficient in our search for the current best evidence and we also need to be selective in what we are going to spend our valuable time reading.

In last month’s newsletter, Terence listed several methods which can help you seek out the evidence you need to answer a question. Those methods included reviewing journals as well as online sources such as the Cochrane library, PubMed, Google Scholar, and Policy Watch. For this article, I am going to focus on PubMed.

Used correctly, PubMed can be very efficient in locating the current best evidence to questions you may have. Once at the PubMed website, a good way to search is to use the MeSH database located in the left hand column. MeSH stands for the Medical Subject Heading Database and is very useful because it helps lessen the chance that you will miss relevant information that uses different terminology for the same concepts.

Once in the MeSH database, enter a keyword in your question and hit "Go". A list of possible definitions will come up. Select the MeSH term that best fits your question. Next, click "Send to Search Box with AND". Then click "PubMed Search". Go back to the MeSH database in the left hand column and repeat the procedure for each key term in your question. Once you have completed the MeSH term search for each of your key words, you will likely have thousands of "hits" for each individual MeSH term. Now you can go to "History" and follow the instructions to combine the individual MeSH terms to perform combined searches. This will help narrow down your search to those articles that contain all your MeSH terms as major topics. A way to narrow your search even further when looking for the best current evidence, is to next select "Clinical Queries" located in the left hand column. Once in the "Clinical Queries" page, enter your desired search number in the Search Box under "Find Systematic Reviews". This will narrow the search of your combined key terms to those articles containing systematic reviews, meta-analyses, and random controlled trials, which give the highest level of evidence.

So, I know that is a lot to take in, but it is important for all of us to learn to become an effective searcher for the best current evidence. It's not easy at first (I am just learning to do this myself), but with a little practice it starts to become easier. As always, if you ever need any help please feel free to contact any of us at the EHS Prehospital Research Initiative.



David Sibley

david.sibley@emci.ca



From the Nerdy Desk of Travers traverah@gov.ns.ca Cell: 902-499-1634

I had the good fortune of attending the Resuscitation Science Symposium in Orlando on Nov 3rd and 4th. This was a satellite symposium with the American Heart Association that draws over 30,000 people to the conference. It was massive. The ReSS is becoming the premiere resuscitation meeting, and we were very fortunate to have the Resuscitation Outcomes Consortium investigators there to present their latest findings. One of the most impressive items was the ROC group's work on demonstrating the deleterious effects of 'hands off time' on cardiac arrest outcomes. The more time the hands are off doing intubation, defibrillation, etc - the worse the patients do. This does not mean that intubation and the other items aren't important, but rather that you have to ensure that you are providing effective CPR always. This is an important piece of evidence that supports the concept of providing effective CPR while minimizing any interruption to chest compressions. There is even work on chest compression only CPR in some EMS agencies. More on this next month. Cheers and Happy Holidays.

From All of us at the Prehospital Research Initiative, we wish you a merry Christmas!!!

