

PRIMARY SURVEY

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ULTRASOUND IN THE SUB-SAHARAN SETTING

Ultrasound in the emergency department is a relatively new but well recognised technique for the emergency physician; this paper presents, by multiple case presentation, its applicability, versatility, and limitations in the resuscitation room in a paediatric emergency department in Malawi.

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USING THE INTERNET

Over 665 million people have access to the internet, which has revolutionised access to healthcare services, as well as being a significant resource for the dissemination of information. In this paper the authors have looked at the prevalence of internet access and health care related use in families of children brought to a large urban paediatric emergency department; the authors have evaluated internet use as a tool for communicating test results to the families and to their primary care physicians.

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PED – PERCEPTIONS OF MEDICAL STAFF SAFETY AGAINST SARS

This questionnaire study was completed near to the onset of a SARS outbreak, to ascertain medical staff perceptions of effective measures to take in the advent of a novel virulent pathogen. Knowing the combination of all infection control measures in protecting emergency department staff did not significantly increase reported compliance. The public health threat appears to be a more motivating influence in following infection control measures.

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HOW DO CLINICAL FEATURES HELP IDENTIFY PAEDIATRIC PATIENTS WITH FRACTURES?

This prospective cohort derived clinical decision rule based on radial tenderness, reduced supination and pronation, and focal swelling. This clinical rule was associated with a high sensitivity, low specificity, and did not alter the x ray rate for such injuries.

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NEBULISED MAGNESIUM SULPHATE AND SALBUTAMOL IN TREATMENT OF ACUTE ASTHMA

One hundred patients with an acute severe or life threatening attack of asthma were randomised into two groups, receiving three doses of either nebulised magnesium sulphate and salbutamol or nebulised salbutamol at 20 minute intervals.

Vital signs and peak flow measurements were taken over a two hour period and arterial blood gases and plasma magnesium levels measured at two time points within this time. There was no difference in increase in PEFr at any time, serum magnesium remained within normal limits in both groups and there was no difference in additional medication required during the study or in the hospital admission rates.

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THE IMPACT OF A NEW REGIONAL AIR AMBULANCE SERVICE ON A LARGE GENERAL HOSPITAL

The Warwickshire and Northamptonshire Air Ambulance, based at Birmingham Heartlands Hospital, was launched in 2003 and in a ten month period, 83 patients were transferred to ED; 74 patients were delivered to other hospitals. The authors have found that this unexpected workload generated 163 ward days, 19 operative procedures and 85 ITU, CCU or HDU days, with direct costs of about £160 000. The authors recommend that indirect as well as direct costs to the receiving hospital should be considered in future discussions regarding the cost effectiveness of air ambulances.

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PREDICTION OF MORTALITY AMONG EMERGENCY MEDICAL ADMISSIONS

What should we do about reducing the mortality of patients presenting to the emergency department?

To reduce the mortality in patients presenting as emergency medical admissions, predictive scores have been proposed. The authors have compared the Rapid Acute Physiology Score with the Rapid Emergency Score, in over 5000 patients, and have found that REMS is a better predictor than RAPS at identifying in-patient mortality.

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