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() 379 Apparent Life-Threatening Event: Multicenter Prospective Cohort Study to Develop a Clinical Decision Rule for Admission to the Hospital (Original Research)

AH Kaji, I Claudius, G Santillanes, MK Mittal, K Hayes, J Lee, M Gausche-Hill

What question this study addressed: Do clinical factors predict when admission is warranted for apparent life-threatening events? *What this study adds to our knowledge:* In this multicenter study of 832 infants with apparent life-threatening events, the presence of any of 3 factors (obvious reasons for admit, significant medical history, >1 apparent life-threatening event in 24 hours) identified most (89%) of the 191 infants who ultimately had justification for hospitalization.

(e) 389 The Prevalence of Traumatic Brain Injuries After Minor Blunt Head Trauma in Children With Ventricular Shunts (Brief Research Report)

LE Nigrovic, K Lillis, SM Atabaki, PS Dayan, J Hoyle, MG Tunik, ES Jacobs, D Monroe, SW Wootton-Gorges, M Miskin, JF Holmes, N Kuppermann, for the Traumatic Brain Injury (TBI) Working Group of the Pediatric Emergency Care Applied Research Network (PECARN)

What question this study addressed: This study measured the prevalence of clinically important traumatic brain injury in a cohort of head-injured children younger than 18 years with and without ventricular shunt. *What this study adds to our knowledge:* Children with ventricular shunts had a rate of clinically important traumatic brain injury (1/98; 1%) similar to that of those without (346/39,619; 0.9%) but higher rate of cranial computed tomography (45/98 versus 13,858/39,634; 46% versus 35%).

() 394 "Patients Who Can't Get an Appointment Go to the ER": Access to Specialty Care for Publicly Insured Children (Original Research)

KV Rhodes, J Bisgaier, CC Lawson, D Soglin, S Krug, M Van Haitsma

What question this study addressed: What are the specialist follow-up referral barriers for children without private health insurance? What this study adds to our knowledge: This qualitative analysis of 26 specialty and 14 primary care physicians confirmed substantial financially oriented barriers to outpatient referral, and the frequent use of the emergency department to facilitate such referrals.

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404 What Is the Accuracy of Screening Instruments for Alcohol and Cannabis Misuse Disorders Among Adolescents and Young Adults in the Emergency Department? (Systematic Review Snapshot) *M Louis, J Ricketson, I Wishart*

AIRWAY

() 407 Videographic Analysis of Glottic View With Increasing Cricoid Pressure Force (Original Research)

J Oh, T Lim, Y Chee, H Kang, Y Cho, J Lee, D Kim, M Jeong

What question this study addressed: A Pentax-AWS video laryngoscope was used during 50 elective intubations to evaluate how increasing amounts of cricoid pressure affected laryngeal view. What this study adds to our knowledge: With this video laryngoscope, increasing cricoid force generally worsened laryngeal view, but there was wide variation across patients.

() 414 A Comparison of the GlideScope Video Laryngoscope to the C-MAC Video Laryngoscope for Intubation in the Emergency Department (Original Research) I Magiar S Chin AE Datapurate IC Saldes

J Mosier, S Chiu, AE Patanwala, JC Sakles

What question this study addressed: Do emergency department (ED) intubation success rates differ between the GlideScope and the C-MAC video laryngoscopes? What this study adds to our knowledge: In this series of 463 ED patients, first-pass and overall intubation success were similar between the 2 video laryngoscopes.

() 421 Video Laryngoscopy, Regardless of Blade Shape, Still Requires a Backup Plan (Editorial) RM Levitan

RESEARCH METHODS

(e) 423 Congruence of Disposition After Emergency Department Intubation in the National Hospital Ambulatory Medical Care Survey (Brief Research Report)

SM Green

What question this study addressed: To assess the quality of the National Hospital Ambulatory Medical Care Survey (NHAMCS) database, 10 years' worth of data were analyzed to determine how many patients who reportedly received intubation were recorded as being sent home from the emergency department or admitted to a non-ICU setting, findings that would suggest that at least 1 variable was inaccurately recorded. *What this study adds to our knowledge:* According to NHAMCS, 1 in 4 intubated patients was sent home or admitted to a non-ICU setting.

GENERAL MEDICINE

() 427 Do Patient-Reported Symptoms Predict Emergency Department Visits in Cancer Patients? A Population-Based Analysis (Original Research)

L Barbera, C Atzema, R Sutradhar, H Seow, D Howell, A Husain, J Sussman, C Earle, Y Liu, D Dudgeon

What question this study addressed: What kinds and intensity of symptoms bring patients with cancer to the emergency department (ED)? What this study adds to our knowledge: In a retrospective cohort study in Ontario with 45,118 patients, 3.8% sought ED care within 1 week of assessment. Pain, tiredness, poor appetite, and lack of well-being triggered visits across all intensities, whereas nausea, drowsiness, and difficulty breathing were triggers when more severe.

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