

# RAPID RESPONSE

## DID YOU KNOW?

Froedtert & The Medical College of Wisconsin have a designated Level 4 epilepsy center, which serves as a regional referral facility offering extensive medical, neuropsychological and psychosocial treatment along with a broad range of surgical procedures.

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ISSUE 1 VOLUME V

## HANDS-ON LEARNING AT ANNUAL CARDIAC PRECEPTORSHIP

Patty Haines, RN, BSN

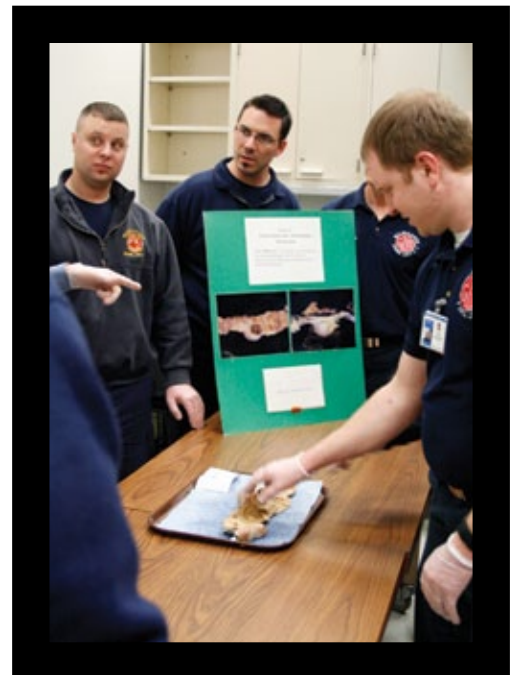
Froedtert & The Medical College of Wisconsin EMS Liaison

More than thirty practicing paramedics and Milwaukee County paramedic students participated in the annual Paramedic Preceptorship in Cardiovascular Care offered by Froedtert & The Medical College of Wisconsin on Jan. 9, 2012.

The hands-on opportunities the preceptorship provided included interpreting 12-lead EKGs with cardiologist Jason Rubenstein, MD, and a tour of the cardiac cadaver lab. Milwaukee County medical examiner and forensic pathologist Brian Peterson, MD, explained the pathology of the hearts present in the lab.

Participants also discussed heart failure with Claudius Mahr, DO, medical director of the Froedtert & The Medical College of Wisconsin Advanced Heart Failure and Cardiac Transplantation Program. Sudden cardiac death and current EMS research were also presented.

The event took place at Froedtert Hospital. Upcoming preceptorships for EMS such as Stroke and Neurovascular are highlighted on the next pages.



*Participants get a close look at the pathology of the hearts in the cadaver lab.*



## EMS: TODAY'S HOUSE CALL

Who says doctors no longer make house calls? I beg to differ and suggest that it is being done hundreds of times a day in southeast Wisconsin.

Emergency Medical Services is the practice of medicine. From first responders to paramedics, these EMS providers are an extension of the physician and they are making daily house calls ... and business calls, street calls, bar calls and wherever calls. There is no place that they won't go to assess and care for a patient.

While definitive care is often found at the hospital and the typical end-point for EMS is transport to the emergency department, the knowledge and skill that is brought to the patient's side is dramatically helpful, if not life-saving.

As an extension of the physician, EMS providers can quickly and efficiently provide sophisticated care. When necessary, Milwaukee County paramedics contact a Medical College emergency physician via telephone or radio for a direct physician consultation. Other providers contact their respective medical control facilities for physician contact, further bringing physician care to the patient's side outside of the hospital.

EMS is clearly today's house call, and it truly is an extension of physician care. EMS providers not only have a responsibility to maintain a high level of skill and knowledge through continuing education, professionalism, and attention to detail, but also they have the privilege of caring for patients often at their greatest time of need.

What an awesome responsibility and privilege ... of which I and my colleagues at Froedtert & The Medical College of Wisconsin are proud to be part.

Charles E. Cady, MD, FAAEM

*Associate Professor of Emergency Medicine  
Froedtert & The Medical College of Wisconsin*

## *Educational Opportunities*

**Stroke and Neurovascular Program Preceptorship -  
Wed., March 14 and Wed., Oct. 17, 2012 8 a.m.-4 p.m.**

**Topics include:**

- Care of stroke/neurovascular patients from onset through rehabilitation
- Principles of stroke/neurovascular patient management and clinical research
- Review of anatomy and physiology associated with stroke and neurovascular patients
- Angio suite, rehab gym and emergency department observation and tour
- Overview of physical, occupational and speech therapies related to stroke/neurovascular patient management

**Register by calling Froedtert  
& The Medical College of  
Wisconsin at 414-805-3666  
or 800-272-3666.**



## EMS ROLE IN STROKE IS VITAL

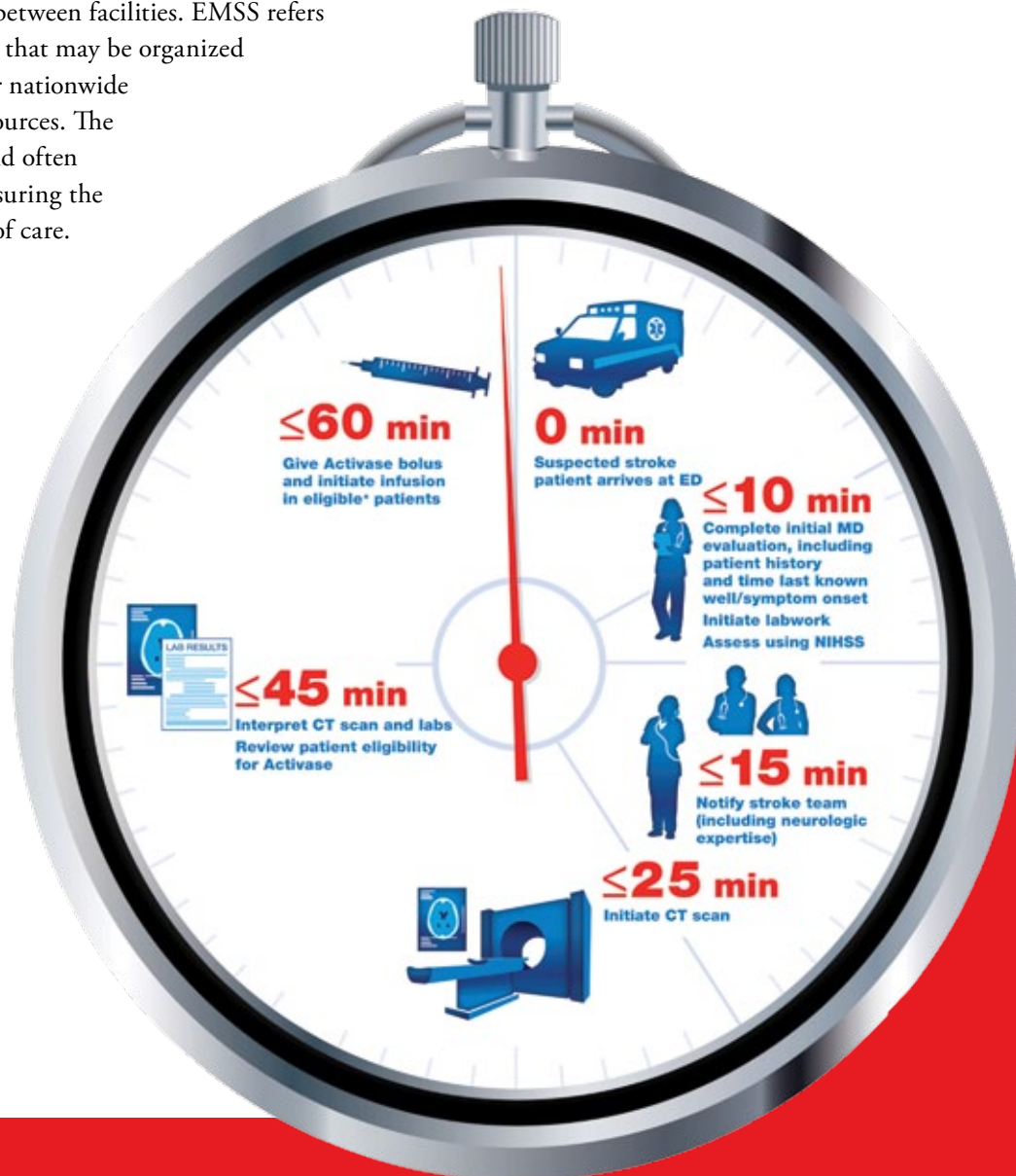
Anne Hansen, MS, Stroke Program Coordinator

As the first medical contact for more than half of all patients who have a stroke, EMS is critical in the management of suspected stroke. EMS transport significantly shortens the arrival time to the hospital. Stroke is an emergency and is treatable within three hours of symptom onset.

Advances over the past decade in acute stroke care highlight the important role of emergency medical services (EMS) agencies and emergency medical services systems (EMSS) in optimizing stroke care. EMS refers to the full scope of pre-hospital services necessary for acute stroke care, including 911 ambulance to a hospital or between facilities. EMSS refers to the delivery systems for EMS that may be organized on a local, regional, statewide or nationwide basis using public or private resources. The successful integration of one (and often multiple) EMSS is critical to ensuring the effectiveness of a stroke system of care.

In 2006, the American Stroke Association (ASA) convened a multidisciplinary group, the ASA's Expert Panel on Emergency Medical Services, to examine in greater detail the previous recommendations involving emergency medical services systems. The Expert Panel examined the challenges associated with integrating EMS activation and response within stroke systems of care and identified the following performance measures and resources to address these challenges.

*(Continued on next page)*





## RECOMMENDED IMPLEMENTATION STRATEGIES<sup>1</sup>

1. For activating and dispatching the EMS response for stroke patients, stroke systems should require appropriate processes that ensure rapid access to EMS for acute stroke patients.
2. For EMS responders, EMSS should use protocols, tools and training that meet current AHA/ASA guidelines for stroke care.
3. Pre-hospital providers, emergency physicians and stroke experts should collaborate in the development of EMS training, assessment, treatment and transportation protocols for stroke.
4. Patients should be transported to the nearest stroke center for evaluation and care if a stroke center is located within a reasonable transport distance and transport time. The determination needs to take into account regional issues such as the availability of stroke centers and geography and whether transportation to a stroke center is possible within the appropriate time for acute therapeutic interventions.

<sup>1</sup>Excerpted from *Implementation strategies for emergency medical services within stroke systems of care: A policy statement from the American Heart Association/American Stroke Association expert panel on emergency medical services systems and the Stroke Council* © 2007 American Heart Association, Inc.

**See the Educational Opportunities for EMS section of this newsletter for details on the upcoming Stroke and Neurovascular Program Preceptorship.**

## WHAT TO DO AFTER AN EXPOSURE TO A BLOODBORNE PATHOGEN

Patti Wilson, RN, Infection Control Coordinator

Occupational exposure to bloodborne pathogens can occur as a result of a health care worker's duties. Keep in mind the definition of an exposure incident means a specific eye, mouth, other mucous membrane, non-intact skin or parenteral contact with blood or other potentially infectious materials that results from the performance of a health care worker's duties. If the exposure is from a puncture, laceration, or exposure to an open skin area, wash with soap and water immediately. If exposure is to the eyes, nose or mouth, flush with cool water for several minutes. Contact your employer as soon as you have performed first aid to the area and follow your employer's policy for reporting of the exposure.

## EMERGENCY RESOURCE GUIDE

Deciding which emergency department to transport your patient to can make a life-saving difference. Fortunately, in southeast Wisconsin, the comprehensive, expert resources your patients need are just minutes away at one of the three emergency departments that are part of the system that is Froedtert Health and Froedtert & The Medical College of Wisconsin. From the most common emergent concerns to life-threatening conditions, our emergency medical experts will take optimal care of your patients – the right care in the right place at the right time. The following EMS Emergency Resource Guide provides a list of key capabilities.

# EMS EMERGENCY RESOURCE GUIDE

Post this panel or keep it handy for reference.

## Froedtert & The Medical College of Wisconsin

8700 Watertown Plank Rd  
Milwaukee, WI  
To call report: 414-805-4343

## Froedtert Health Community Memorial Hospital

W180 N8085 Town Hall Road  
Menomonee Falls, WI 53051  
To call report: 262-257-5998

## Froedtert Health St. Joseph's Hospital

3200 Pleasant Valley Rd  
West Bend, WI 53095  
To call report: 262-836-8257

CARDIAC			
Cath lab	✓ ON-SITE	✓ ON-SITE	✓ VIA TRANSFER*
Cardiologist available 24/7	✓ ON-CALL	✓ ON-CALL	✓ ON-CALL
STROKE/ALTERED MENTAL STATUS			
CT scanner 24/7	✓ YES	✓ YES	✓ YES
Certified stroke center	✓ YES	✓ YES	N/A
Interventional neurology	✓ YES	✓ VIA TRANSFER*	✓ VIA TRANSFER*
Neurologist available 24/7	✓ ON-SITE	✓ ON-CALL	✓ ON-CALL
TPA administered	✓ YES	✓ YES	✓ YES
TRAUMA			
Level designation	<b>ADULT LEVEL I</b> <i>(The only one in eastern Wis.)</i>	<b>ADULT LEVEL III</b> <i>and Pediatric Care</i>	<b>ADULT LEVEL III</b> <i>and Pediatric Care</i>
ABDOMINAL/THORACIC PAIN			
CT scanner 24/7	✓ YES	✓ YES	✓ YES
Trauma surgeon available 24/7	✓ ON-SITE	✓ ON-CALL	✓ ON-CALL
OB/GYN, BIRTHING			
24/7 coverage	✓ YES	✓ YES	✓ YES
Birthing center	✓ YES	✓ YES	✓ YES

\*Seamless transfer to Froedtert & The Medical College of Wisconsin