

Rural Healthcare Quality Network

A Clinical Forum Newsletter

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Medical Literature Review

Infectious Disease

Question: Can treatment of central venous catheters with anti-infective agents reduce the incidence of blood stream infections?

Answer: Early trials indicate that these relatively inexpensive catheters will enhance the effectiveness of current central line "bundles."

Source: Health Technol Assess. 2008; 12(12):1-154

Family Practice/Internal Medicine

Question: What potential benefit do patients receive, other than decreased physical morbidity, with laparoscopic surgical procedures?

Answer: Significant reduction (up to 50%) of hospital acquired infections is associated with lap chole, appy, and hysterectomy.

Source: Surgical Endoscopy. April 2008

Medication Management

Question: An asymptomatic patient on coumadin has an INR reported as >9. What should be done?

Answer: Hold coumadin and consider administration of 5-10 mg of vitamin K, PO.

Source: American College of Chest Physician Guidelines, 2004.

Urgent/Emergent Care

Question: Is an intra-articular lidocaine injection as effective as conscious sedation in providing analgesia and effective reduction of an acute ankle fracture-dislocation?

Answer: Yes. Intra-articular injection of 12 cc of lidocaine allows an effective alter-



native to conscious sedation.

Source: J. Bone Joint Surg. AM 2008; 90(4):731-4

Nursing Focused Care

Question: Do acute stroke patients benefit from telemetry?

Answer: Many authors recommend telemetry as a significant number of these CVA patients will demonstrate arrhythmia, including atrial fibrillation.

Source: EMedHome, Clinical Pearl, April 2008 (4 references)

Risk Management:

Question: Is recurrent anaphylaxis, following initial presentation (within 72 hours) a clinical concern?

Answer: Biphasic anaphylaxis occurs in 1-23% of cases. Patients discharged from care should be warned of this possibility with strict instructions to return for immediate care if symptoms recur.

Source: Curr. Allergy Asthma Rep 2008. March, 8(1): 45-8.

Practice Pearl:

Question: Is community acquired *Clostridium difficile*-associated diarrhea (CA-CDAD) associated with severe illness in healthy patients without risk factors?

Answer: Yes. The incidence of CA-CDAD in non-hospitalized patients is on the rise and these individuals may be infected with an aggressive hyper-toxin-producing strain. Stool *C. difficile* toxin assay should be considered in all patients presenting with acute diarrhea disease.