

Rural Healthcare Quality Network

A Clinical Forum Newsletter



Medical Literature Review

Infectious Disease

Question: Are fluoroquinolones first line therapy for uncomplicated urinary tract infections?

Answer: Resistance rates for E. coli to fluoroquinolones (and TMP/SMZ) are approaching 25% in some communities. Should nitrofurantoin be first line therapy with E. coli resistance rates less than 3%?

Source: B.J. *Urology International* 2008; 102: 1634-1637

Family Practice/Internal Medicine

Question: What is the initial diagnostic test recommended for the adult patient with asymptomatic microscopic hematuria greater than 3 RBCs per high power field on 2 of 3 specimens?

Answer: CT urography (contrast).

Source: *American Family Physician*. Aug 1, 2008

Medication Management

Question: Does the use of a morphine versus a dilaudid PCA result in fewer opiate side effects?

Answer: No side effect differences are noted, and pain control and patient satisfaction are equal with both medications.

Source: *Anesth. Analgesia* 2008; 107(4):1384-89

Urgent/Emergent Care

Question: What is the most important factor in the success rate of epidural blood patch for the treatment of post-spinal headache?



Answer: Duration of spinal headache. Treatment within 24-hours is most effective.

Source: *Journal of Emergency Medicine* 2008; 35 (2): 145-157

Nursing Focused Care

Question: What is the most reliable predictor of whether an ED headache patient will continue to have significant headache pain following treatment and discharge.

Answer: Total DURATION of headache and not discharge pain intensity is the most reliable predictor of continued headache in the next 24 hours.

Source: *Ann. of Emergency Med* 2008; 52:696-704

Risk Management:

Question: What is the ED's legal obligation with respect to documentation when discharging an intoxicated patient or one who has received opiates or sedatives?

Answer: Documentation of warning the patient not to drive and also documenting a reasonable effort to arrange alternative transportation.

Source: *Expert legal opinion:* C. Brypert, NP, JD.

Practice Pearl

Question: Is PCI (percutaneous coronary intervention) recommended for patients with stable CAD (coronary artery disease)?

Answer: No. PCI is not superior to optimal medical therapy in this group for lowering the risk for cardiovascular death or future myocardial infarction. Clinical guidelines recommend documentation of moderate to severe ischemia with stress testing before consideration of PCI.

Source: *JAMA* 2008 Oct 15; 300: 1765

