

Rural Healthcare Quality Network

A Clinical Forum Newsletter



Medical Literature Review



RURAL HEALTHCARE QUALITY NETWORK

Quality Matters...

Infectious Disease

Question: Emerging resistance of the gonococcus has prompted the CDC to recommend dual therapy for the treatment of gonorrhea. What are these regimens?

Answer: Ceftriaxone, 250mg IM plus either azithromycin (1 gram orally) or doxycycline (100 mg daily for 7 days). Chlamydia is also covered with this regimen.

Source: *MMWR Weekly*, 7-8-11.

Family Practice/Internal Medicine

Question: Can MRI be used to reliably diagnose acute pulmonary embolism rather than CT angiography?

Answer: Yes. The accuracy of contrast enhanced MRA is equivalent to helical CT.

Source: *Annals of Emergency Medicine. ePub Online.* 4/29/11.

Medication Management

Question: What drug is currently recommended as first line therapy for acute pericarditis?

Answer: Colchicine, 1mg/day. 4-6 weeks of treatment is recommended. This regimen reduces the likelihood of recurrence, often seen with prednisone.

Source: *Mayo Clinic Proceedings Vol. 85; pg. 572.*

Urgent/Emergent Care

Question: What is the duration of action of naloxone?

Answer: 45-70 minutes, shorter than the duration of many opiates. Thus naloxone infusion may be necessary.

Source: *Circulation*, 2010; 122: S829.

Nursing Focused Care

Question: Is cranberry juice useful for reducing the frequency of recurrence in women with UTI?

Answer: Yes. The mechanism is thought to be related to chemicals in the juice that prevent E. coli from adhering to uroepithelial cells.

Source: *Mayo Clinic Proceedings* 7/11/11. Pg. 686.

Risk Management:

Question: Does the lack of detectable urinary myoglobin exclude the presence of clinically significant rhabdomyolysis?

Answer: No, as there may be a 6hr lag time before myoglobin is identified in the urine. Check CK!

Source: *American Journal of Emerg Med, Vol. 27, pg 876.*

Practice Pearl:

Question: What is the role of opioids (morphine) in the management of AHF (acute heart failure)?

Answer: Use of morphine in the management of heart failure does not improve morbidity or mortality and may even have a deleterious effect. Management focus is now directed toward the aggressive use of nitrates, particularly in those patients with acute pulmonary edema associated with elevated systolic blood pressure. NIV (Noninvasive ventilation) is also stressed to reduce the need for intubation and short-term mortality.

Source: Congestive Heart Failure ED Management. Text, Cardiac Emergencies: Cases, Concepts, and Management. March 2011.

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