

Emergency Department Update

Friday, September 6th, 2024

Issue # 167

GENERAL

Open Enrollment begins September 30th

If you are not already enrolled, the SF Health Service System (SFHSS) Open Enrollment Period is your opportunity to get enrolled in CCSF's high quality employee health care system. **The Open Enrollment period for 2024 is between September 30th and October 25th.** If you use a flexible spending account, you must enroll and elect in this yearly.

Don't fret: outside of the Open Enrollment period, CCSF employees can also alter their healthcare plan whenever a [qualifying life event](#) occurs.

Learn more: Your 2024 CCSF Employee Health Benefits Guide can be found [here](#). Additional information is available on the [SFHSS website](#)

ED TB Clearance

We are still looking for nursing staff to become TB champions & N95 champions for the emergency department. This will allow you to place and read PPD for DPH employees. If you are interested in this training please reach out to Robert.gnat@sfdph.org or Matthew.Talmadge@sfdph.org

Triage Patient Experience Specialist

Gentle reminder: Our triage patient experience specialists does not escort visitors into the pods or upstairs. The triage patient experience specialists must not leave their post to escort visitors to their destination. We are working on self-leave navigation methods, like lines on the floor, to allow visitors to self-navigate. If a visitor needs to get upstairs after they have been cleared by the PEX staff at the window, they can be let into the main lobby after hours and be managed by lobby staff.

MOUD Guideline

Are you confused when and for whom you should start buprenorphine or methadone? Are you unsure which formulation of buprenorphine to use (sublingual, subcutaneous)? Look no further. **Thanks to our friends at the Acute Care Innovations Center, we now have an updated [MOUD guideline](#).**

Highlights:

- Algorithm on what MOUD to give if COWS is <8 or ≥ 8
- What time of the day is best to administer long-acting injectable (LAI)/subQ buprenorphine
- New information sheet on LAI buprenorphine
- New sublingual low-dose (aka microdosing) bubble packs available for prescribing to the ZSFG outpatient pharmacy

Remember, because the LAI/subQ buprenorphine can only be given by ACT LVNs right now, it technically CAN BE GIVEN IN TRIAGE!

And finally, thank you for all you do for our patients with OUD! Truly a team effort, as highlighted in this amazing poster (attached) that [@Lee, Terrence](#) will be presenting at Stanford's LEAN conference in September. Check it out!

Increasing Access to Buprenorphine for Opioid Use Disorder, a Multi-Pronged Approach

Faculty Authors: Esther Chen, MD; Malini Singh, MD, MPH, MBA; Kathy LeSaint, MD; Jeremy Lacocque, DO; Steven Straube, MD, MBA; Melanie Molina, MD, MAS
Resident Authors: Terrence Lee, MD; Kirsten Douglass, MD; Alexa Lucas, MD, MBA; Lane Epps, MD; Carolina Ornelas-Dorian, MD, MPH; Katie DeWilde, MD; Karan Bains, MD, MBA; Laura Checkley, MD; Kishan Patel, MD



Background and Problem

In the United States, more than 130 people die from opioid-related drug overdoses each day, with San Francisco having the highest opioid overdose rate in California. The current rate of opioid-related deaths may continue to outpace previous years and even surpass the spike of deaths in 2020. In San Francisco, annual opioid-related deaths increased from 104 (2016) to >800 (2023) since fentanyl became more widely available. During the height of the COVID-19 pandemic (March – November 2020), overdose-related emergency department (ED) visits increased by 30%.

Despite programmatic efforts by the City of San Francisco to mitigate these deaths, there continues to be many patients who are unable to access these resources. Buprenorphine (BUP) is a highly effective but underused treatment for individuals with opioid use disorder (OUD), particularly those with unmet social needs (e.g., food, housing, or transportation insecurity). Despite more resources for outpatient addiction care, few prescriptions for BUP are written or started in the ED.

Prehospital and ED clinicians care for patients with unmet social needs and substance use disorders, particularly those without access to primary care. These are critical settings for public health interventions, such as provision of BUP for patients with OUD, and play a pivotal role in combating the opioid epidemic.

Current State and Analysis

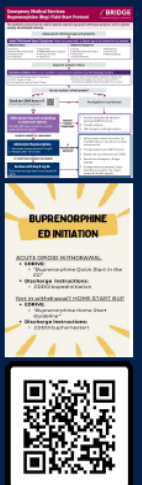
In the first 5 months following the elimination of the X-waiver requirement in January 2023, BUP was administered to an average of 11 patients per month and prescriptions provided for about 5 patients per month at the Zuckerberg San Francisco General Hospital (ZSFG) ED. These rates are likely inadequate to treat the volume of patients with OUD who may benefit from treatment. The San Francisco Chronicle recently reported data from the Office of the Chief Medical Examiner that the year 2023 surpassed 2020 as the

deadliest year for opioid-related deaths in San Francisco.

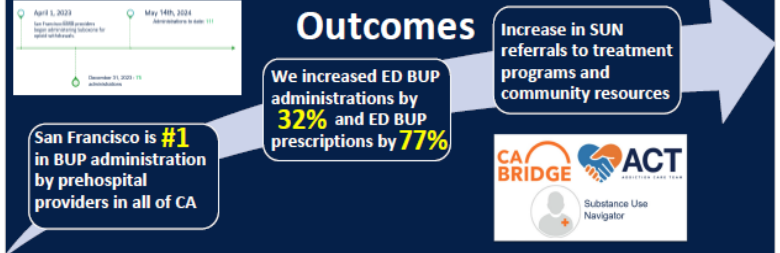
	Buprenorphine administered in the ED	Buprenorphine prescriptions from the ED
Jan (2023)	8	3
Feb (2023)	14	2
March (2023)	8	7
April (2023)	12	7
May (2023)	12	5
Total	54	24
Mean	10.8 per month	4.8 per month

Countermeasures

- PREHOSPITAL INTERVENTIONS**
 - In April 2023, we initiated prehospital identification and suboxone administration for patients with opioid withdrawal, in collaboration with Base Hospital consultation.
- ED INTERVENTIONS**
 - In July 2023, we implemented a resident-led quality improvement project to increase BUP administration in the ED and linkage to outpatient substance use care from the ED.
 - We educated providers about BUP treatment for OUD using digital solutions (e.g., dotphrases, fliers) and provided streamlined discharge workflow for outpatient resources.
- BRIDGING TO CARE**
 - In 2016, ZSFG joined California Bridge, a statewide program that supports emergency providers and community partners to better serve people with substance use disorder without a primary care home.
 - ZSFG hired individuals with expertise in substance use disorder to connect patients to outpatient treatment programs from the ED.



Outcomes



Key Learnings and Next Steps

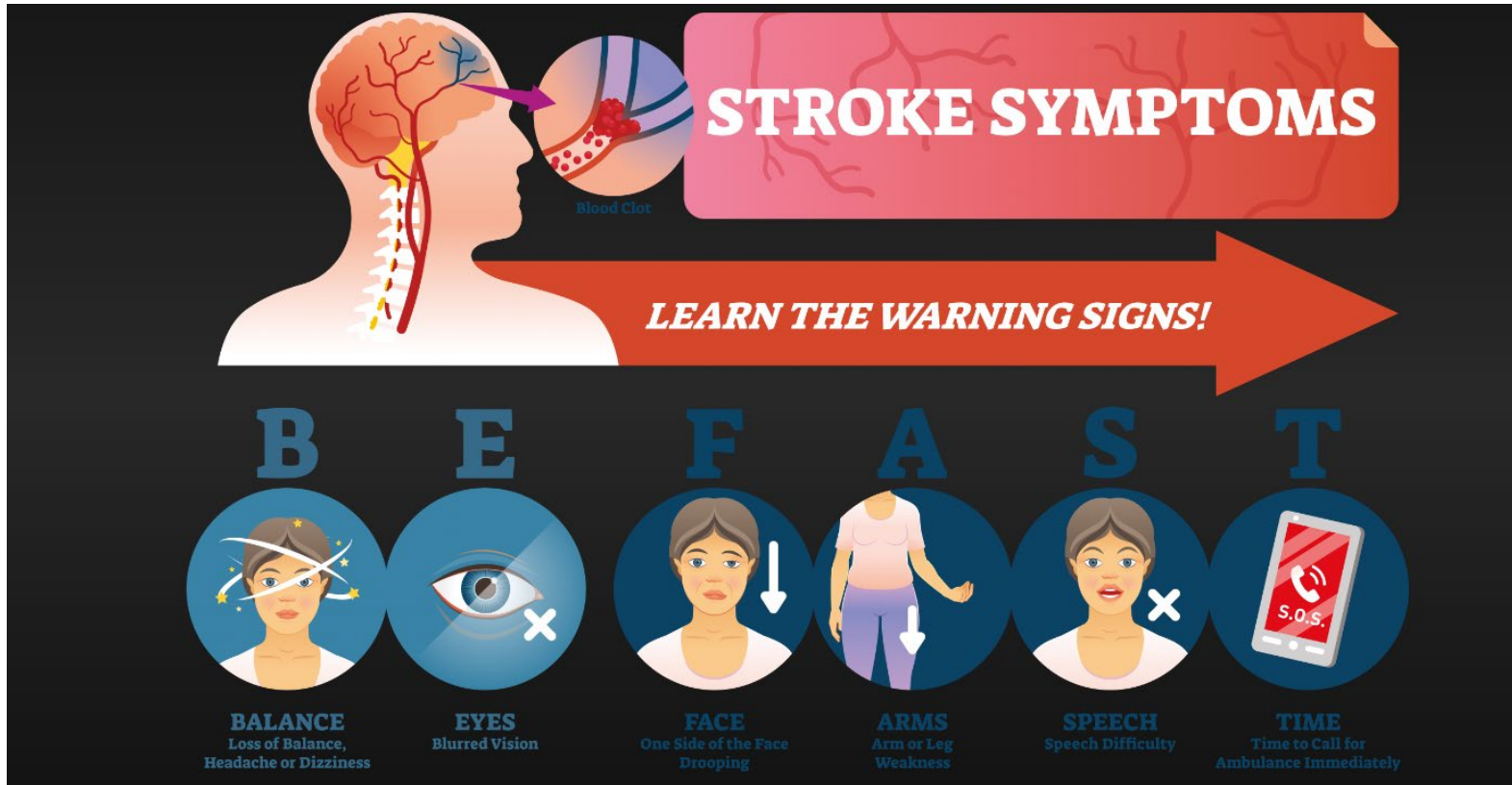


Objective

To increase prehospital and ED BUP administration and ED BUP prescriptions for patients with OUD

Stroke Assessment: BEFAST

Please review the symptoms for Stroke below. Remember RN's can activate a stroke if there is suspicion including in the Pods.



Education News:

- RESUS and TRIAGE Trainings
 - There are multiple people actively training to both areas on days and nights. We are hosting more Resus and Triage Classes in September
- MEA In-Person ANNUAL UPDATE
 - If you haven't already, please sign up in the ED Conference Room for a class in September

New trauma medical director and the return of a familiar face



ZSFG Trauma Program and Department of Surgery News and Notes

Dr. Timothy Browder, MD will be stepping into the role of **Trauma Medical Director** at ZSFG effective September 17, 2024.

Dr. Browder attended Whittier College for his undergraduate education and the University for Nevada for medical school. He completed his general surgery residency and surgical critical care fellowship at University Medical Center in Las Vegas. Dr. Browder is certified by the American Board of Surgery in General Surgery and Surgical Critical Care. Dr. Browder has extensive clinical and leadership experience, having served at several of the busiest Level 1 trauma centers in the country. He received an education masters degree from the USC-Keck school of medicine. He served as the Surgical Critical Care Program Director at Stanford University prior to taking the Trauma Medical Director position at the UCSF-East Bay surgery program. Please help us welcome Dr. Browder to ZSFG where he will lead our ZSFG trauma program and will be an invaluable leader within the Department, the School of Medicine, and ZSFG.



Dr. Denzel Woode and **Dr. Pooja Neiman** have started as our new Surgical Critical Care Fellows. The **Surgical Critical Care Fellowship** at Zuckerberg San Francisco General Hospital (ZSFG) is a two-year fellowship in Surgical Critical Care (SCC) and Trauma and Emergency Surgery (ACS) set up to train the next generation of Critical Care leaders and educators who provide outstanding patient care to critically ill and injured patients.



Dr. Kent Garber



Dr. Caitlin Collins

We have had several additions to our amazing Trauma Attending team since 2023.

Dr. Kent Garber and **Dr. Caitlin Collins** - who were previous Surgical Critical Care Fellows are now Trauma Attendings.



Dr. Rachel Koch



Dr. Rochelle Dicker

We welcome **Dr. Rachel Koch** who joins us after completing her Surgical Critical Care and Acute Care Surgery Fellow at the University of Utah.

We are thrilled to welcome back **Dr. Rochelle Dicker** who returns to ZSFG from UCLA.

MOVING FROM AWARENESS TO ACTION:

Preventing Geriatric Falls
Post Hospitalization

September 17, 2024

9:00 am Pacific Time

Hosted by:
The Trauma
Prevention Coalition



Did you know **FALLS** are the
#1 trauma mechanism
that contribute to patients
presenting as a trauma patient?

This session will delve into recent findings from a study on screening adults for falls before discharge. Our panelists will discuss how this data can assist hospitals in transitioning from awareness to actionable steps in preventing falls post-discharge. This is a valuable opportunity to learn from experts and contribute to creating a safer environment for our patients. **(4 CES Awarded FREE)**

Date: September 17, 2024

Time: 9:00 – 10:30 PM Pacific Time

PEM PEARL

Dina Wallin, MD, FACEP, FAAP

Although our [Medications for Opioid Use Disorder \(MOUD\) pathway](#) doesn't specify an age, it is intended for adult patients. What do we do if we're caring for an *adolescent* who has opioid use disorder? Turns out, probably the same thing! A brand new [review article](#) released by the ACEP PEM Committee describes a paucity of literature about OUD in kids, and, based on a combo of the scarce research out there and expert consensus, recommend **buprenorphine** in the same way we give it to adults.

So, although our substance use team and guidelines are *technically* for adult patients, this doesn't mean we can't screen for or treat OUD in our adolescent patients (and, in fact, screening and treatment are recommended and can save lives!). I recommend discussing these patients with our substance use navigators and/or ED pharmacists as you consult the guideline, and don't forget to give out naloxone in hand!

- Dina Wallin, MD

EDUCATIONAL OPPORTUNITIES



Are you ready for some incredible trauma education in beautiful Monterey? Come join us at the beautiful Hyatt Regency Monterey Hotel And Spa for our 35th Annual Totally Trauma Conference on October 21st and 22nd! We will be celebrating **35** years of quality trauma education and we want you to be there! We will have an array of phenomenal speakers presenting on a wide variety of interesting, evolving and evidence-based trauma best practices. Come relax by the sea and soak up knowledge about all things trauma! Register at www.tecba.org

The challenges of providing quality trauma care continue. Trauma providers are expected to have advanced knowledge and skills in diagnosis, treatment and on-going management. The goal of TEC's Totally Trauma Conference is to present the most current clinical information available about the care of the injured patient. To meet this goal, we have coordinated an outstanding program with faculty who are providing frontline care. This dynamic conference will address cutting edge trauma care issues.

Our target audience is nurses, pre-hospital providers, advanced practice nurses and allied health professionals.

Course Objectives:

At the conclusion of this program the participants will be able to:

1. Discuss the current management and complications related to specific populations of trauma.
2. Describe three priorities when caring for the traumatically injured patient.
3. Identify key points learned from cases in trauma and how these impact practice.

Continuing Education:

Provider is approved by California Board of Registered Nursing, CEP 9916, for at minimum 14 hours.

This course has been approved for minimum 14 hours of Category 1 EMT-P Continuing Education by California EMT-P CE Provider

MOVING FROM AWARENESS TO ACTION:

Preventing Geriatric Falls Post Hospitalization

September 17, 2024

9:00 am Pacific Time

Hosted by:
The Trauma
Prevention Coalition



We are excited to invite you to an insightful and impactful webinar titled **"Moving from Awareness to Action: Preventing Geriatric Falls Post-Hospitalization,"** hosted by the Trauma Prevention Coalition.

Date: September 17, 2024

Time: 9:00 – 10:30 PM Pacific Time

Webinar Description:

This session will delve into recent findings from a study on screening adults for falls before discharge. Our panelists will discuss how this data can assist hospitals in transitioning from awareness to actionable steps in preventing falls post-discharge. This is a valuable opportunity to learn from experts and contribute to creating a safer environment for our patients.

Objectives:

- Describe how falls can affect patient outcomes and healthcare systems.
- List social and patient implications when fall prevention is part of the transition from hospital to home/community.
- *Discuss the importance of leveraging data from assessments, screening results, and research to move from awareness to action.*

Continuing Education Credits:

The Trauma Center Association of America is approved by the California Board of Registered Nursing, Provider Number 16459, for 1.5 contact hours. Certificates must be retained for 4 years after the date of issue. Nurses should claim only credit commensurate with the extent of their participation in the activity.

Registration:

Please register for the *FREE* webinar using the following link: [Webinar Registration](#)
Don't miss this opportunity to enhance your knowledge and skills in fall prevention and to contribute to a safer patient environment. We look forward to your participation.

Geriatric Resource RN Course

If you are an AFED champion, or you want to be, you should definitely take this class. The AFED grant allows for funding to pay people to attend this class.

Please let me know if you would like to be an AFED champion. If you have voiced interested in the past, then I have your name on my list. I plan on starting to have meetings and trainings beginning in the Fall, and will send out messaging soon. – Rachel Perry



GERIATRIC RESOURCE RN COURSE 2024

1-DAY COURSE
OFFERED OCTOBER 11TH, 2024

Limited seating.
To register:
<https://forms.office.com/g/zqk0GaTBGK>



Questions: contact
medsurged@sfdph.org

Hospitalization in older patients holds many risks such as functional decline and delirium. After attending this full day course based on the NICHE curriculum participants will be able to:

- Describe age-related changes in health.
- Utilize strategies to prevent functional decline.
- Assess and prevent delirium
- Identify effective strategies in caring for patients with dementia
- Identify medications to avoid in older adults

LOCATION	TIME
CARR Auditorium	0830-1700
1001 Potrero Ave. Bld 3	
San Francisco, CA 94110	
CONTACT HOURS	COST
TBD	Free

Continuing education credits approved by the California Board of Registered Nursing Provider Number 858 for 6.25-12.75 contact hours. Provider: Zuckerberg San Francisco General Hospital Nursing Services. Cancellation Policy: An attendee-initiated cancellation at 10-days or more before the class date is entitled for a full refund or a voucher applicable towards a future class; a cancellation less than 10 days before the class date is not entitled for a refund or voucher. A department-initiated cancellation entitles the attendee for a full refund or voucher towards a future class. These terms do not apply to free courses.

The following classes are available on the next schedule request

NICHE- geriatric care 10/11 830-1700

ACLS-EP 10/24

RNs and MEAs can attend both classes

Cadaver Lab offering in Oakland

PLEASE JOIN US FOR A CLINICAL AND MEDICAL AFFAIRS PROCEDURAL CADAVER LAB

Teleflex is proud to invite you to a Procedural Cadaver Lab. Participants will enhance their understanding using multiple learning modalities including didactic and hands-on practice on cadaveric specimens and simulations aids.

Case study and patient care scenarios are designed to provide attendees with an opportunity to apply the program content to simulated clinical practice. The content is designed to provide attendees with the information necessary to make well informed decisions regarding optimal patient care.



WHEN Alameda Health System EZ-IO Procedural Lab

Tuesday Sept. 24, 2024

We offer 8 sessions to choose from. Please allow 1.5 hours for your session.

This program will focus on procedures for: intraosseous access.

WHERE Hampton Inn & Suites by Hilton Oakland

Airport 1700 Harbor Bay Pkwy

Alameda, CA 94502

Free parking for attending this education.

TO REGISTER:



https://TeleflexCMA.formstack.com/forms/alameda_health_ez_io_procedural_lab_oakland_ca_2024_09_24

If you experience difficulty accessing the registration site via a workplace computer, please access from a web enabled device outside your workplace.

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This program has been approved by the American Association of Critical-Care Nurses (AACN), for 1.50 CERP, Synergy CERP Category A, File Number 24918. Approval refers to recognition of continuing education only and does not imply AACN approval or endorsement of the content of this educational activity, or the products mentioned.

ED Specific Meetings and Committees:

Staff meetings: 3rd Thursday 800 or 1700. Lead: Matt Talmadge

Practice Committee: 3rd Thursday 900-1000. Lead: Brian McNally

Violence in the Workplace: 3rd Tuesday 2-3. Lead Matt Talmadge

EDACT: 1st Thursday 1-2. Leads: Rachel or Carolina Chief Res

AFED: Starting Oct- 1st Monday 1-2. Lead: Rachel

ZSFG Learn Courses at DET

- *ENPC NEXT WEEK: 9/12-13 1100-1900 both days*

How classes are coded in payroll for ED employees

- ENPC- 19 hours paid j time
- TNCC- 19 hours ED leave pay
- ACLS/BLS Skills- 8 hours j pay
- PALS- 6.5 hours ED pay
- ACLS ep- 8 hours j pay

CELEBRATIONS/ANNOUNCEMENTS

CELEBRATIONS

Send me your celebrations (Robert.gnat@sfdph.org) that you would like included in the ED Updates and I will share them here.

Positive Feedback from NRC patient surveys:

"I was well cared for. I was treated with respect. Thank you."

“

Staff Shoutouts

Shout to our EVS partners for continuously keeping our department so clean including our breakrooms.

-ED Management Team

Celebrating Veronica Pitteard for her dedication, and support of the night shift crew.

-Night shift staff
