Commentary

Hospital Residents Working Medical Shifts Longer than 16 Hours

JFA Murphy

Editorials

A Time for Action: Tackling Paediatric Behavioural and Emotional Disorders

Z. Yusuf, F. Sharif

Original Papers

Can Early Changes In Vital Signs Predict Duration Of Antibiotic Therapy In Suspected Neonatal Sepsis?

M. McGovern, P. Morrissey, E. Ryan

McGovern et al studied 96 infants admitted to the neonatal unit for antibiotic therapy. Sixteen infants required prolonged antibiotic therapy beyond 48 hours. Those infants in the prolonged antibiotic group were more likely to have persistent abnormal signs including respiratory rate.

<table>
<thead>
<tr>
<th>Table 1. Sepsis risk factors present</th>
<th>Standard (n=80)</th>
<th>Prolonged (n=16)</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal antibiotics before delivery</td>
<td>28</td>
<td>5</td>
<td>1.0</td>
</tr>
<tr>
<td>Prolonged rupture of membranes</td>
<td>29</td>
<td>4</td>
<td>0.566</td>
</tr>
<tr>
<td>Foul smelling liquor</td>
<td>3</td>
<td>0</td>
<td>1.0</td>
</tr>
<tr>
<td>Maternal GBS</td>
<td>15</td>
<td>1</td>
<td>0.295</td>
</tr>
<tr>
<td>Fetal tachycardia</td>
<td>12</td>
<td>2</td>
<td>1.0</td>
</tr>
<tr>
<td>Maternal pyrexia</td>
<td>26</td>
<td>1</td>
<td>0.035 *</td>
</tr>
</tbody>
</table>
**Estimated Weight of Paediatric Patients Versus Measured Weight – A Prospective Comparison**


Lineen et al have examined the relationship between estimated and measured weight in children. Estimated weight underestimated the actual weight in between 2.34% and 16.39% of cases.
Audit of PPI Prescribing Practices: A Risk to Patient Safety?

L. O’Connell, R.M. O’Connell, O. Ahmed, K. Mealy

O’Connell et al conduct an audit to identify inappropriate PPI prescribing.

Distribution of appropriate prescriptions – on PPI/not on PPI

<table>
<thead>
<tr>
<th></th>
<th>Not on PPI</th>
<th>On PPI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appropriate</td>
<td>24</td>
<td>20</td>
</tr>
<tr>
<td>Inappropriate</td>
<td>1</td>
<td>45</td>
</tr>
</tbody>
</table>

‘TAG, You’re It!’ The high-stakes Game of Handovers in the Emergency Department - Improving handover quality using a new ‘TAG’ Protocol

N. Borhan, R. Dharamshi, F. Borhan, S. Ahmed, R. Gilmore

Borhan et al stress the importance of good patient handover during shift change in the emergency department. The authors implemented a Target Assessment Game plan to improve communication. The standardized TAG handover protocol significantly improved handover practices.
TAG- You’re it!!
The Emergency Department Handover Template between Emergency Physicians.

T
TARGET
• Accepting physician's name and designation

A
ASSESSMENT
• Impression
• Actions including outstanding investigations / persons involved

G
GAME PLAN
• Disposition plan
• Bedside patient introduction
• Update ED computer system/chart

You’re it!
Handing Over? Document Referring physician’s name, designation & Medical council number.

<table>
<thead>
<tr>
<th>Handover parameters</th>
<th>Pre-TAG (number of patient charts)</th>
<th>Pre-TAG (%)</th>
<th>Post-TAG (number of patient charts)</th>
<th>Post-TAG (%)</th>
<th>Percentage improvement after TAG implementation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>status</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Accepting physician’s name in Computer</td>
<td>12/15</td>
<td>3/15</td>
<td>80</td>
<td>20</td>
<td>20/20</td>
</tr>
<tr>
<td>Documented accepting physician’s name in ED chart</td>
<td>1/15</td>
<td>14/15</td>
<td>7</td>
<td>93</td>
<td>10/17</td>
</tr>
<tr>
<td>Handover plan documented in ED chart</td>
<td>4/15</td>
<td>11/15</td>
<td>27</td>
<td>73</td>
<td>16/17</td>
</tr>
<tr>
<td>Handover plan sufficient</td>
<td>2/15</td>
<td>13/15</td>
<td>13</td>
<td>87</td>
<td>16/17</td>
</tr>
<tr>
<td>Documentation of acceptance</td>
<td>11/15</td>
<td>4/17</td>
<td>76</td>
<td>24</td>
<td>N/A</td>
</tr>
</tbody>
</table>

N/B. 3/20 written ED handover charts were not accessible for review for post-TAG audit

A Dedicated Perineal Clinic - An Audit in Support

E. Corry, E. O’Connor, M. Eogan, M. Fitzpatrick, S. O’Sullivan, M. Imcha
C. Madden, S. Lydon, K. Lambe, P. O’Connor

Madden et al have analysed the barriers to hand hygiene practices. Ownership and leadership are major enablers. The study also highlights a lack of knowledge, skills, and awareness of hand hygiene issues. Protocols have a limited value and should be strengthened with ‘stories’ applied to the 5 moments of hand hygiene.

Figure 1. Five moments for hand hygiene

<table>
<thead>
<tr>
<th>Moment 1: Before touching a patient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moment 2: Before a clean/aseptic procedure</td>
</tr>
<tr>
<td>Moment 3: After body fluid exposure risk</td>
</tr>
<tr>
<td>Moment 4: After touching a patient</td>
</tr>
<tr>
<td>Moment 5: After touching patient surroundings</td>
</tr>
</tbody>
</table>

Figure 2. Themes and subthemes emergent from the thematic analysis
1. Capability of healthcare staff to engage in HH
   Reference to knowledge, skills and awareness of HH issues.

2. Environmental barriers and enablers to HH compliance
   Environmental factors that support or inhibit individuals’ engagement with HH.

3. Range of interventions
   Current range of interventions available to encourage HH compliance.

4. Motivating factors
   Individuals’ brain processes that energise and direct behaviour.

5. Impact of protocols
   Reference to effectiveness of protocols on actual HH behaviour.

6. Future suggestions
   Suggestions or plans for future changes in HH practice or policy.

- Social enablers and barriers
- Physical enablers and barriers

- Capability interventions
- Opportunity interventions
- Motivation interventions

- Facilities
- Changes to protocols/guidelines
- Education
- Culture change
- Targets
Where does Pelvic and Acetabular Fracture Treatment fit into the Newly Proposed Major Trauma Model in Ireland?

C. Fenelon, E.P. Murphy, B.J. O’Daly, M. Leonard

Fenelon et al have reviewed 456 referrals for pelvis and acetabular fracture. The treatment was conservative in two thirds of cases and operative in the other third. The authors support a single centre for the management of pelvic and acetabular fractures.

Figure 3. Post operative X-ray of the 64-year-old male following a fall from a ladder sustaining an acetabular and iliac wing fracture
Surgical Parathyroidectomy Services

E. Burke, A. Waris, G. O’Donoghue
Burke et al report a series of 31 cases of parathyroidectomy. All cases were discharged on post op day 1.
Case Reports

An Under-Recognised Cause of Iatrogenic, Severe Metabolic Acidosis

A. Spring, R. Owens, M. Fratita, M. O’Dwyer

Spring et al report a case of high anion gap metabolic acidosis in a patient being treated for a prosthetic hip infection. The precipitating cause was pyroglutamic acidosis. The risks of concurrent use of paracetamol and flucloxacillin in the development of the disorder has previously been reported. The flucloxacillin and paracetamol was discontinued and the patient was treated with IV N-acetylcysteine.

Table 1. Serial arterial blood-gas (ABG) analysis

<table>
<thead>
<tr>
<th></th>
<th>Initial</th>
<th>Day 1</th>
<th>Day 3</th>
<th>Day 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>pH</td>
<td>7.19</td>
<td>7.29</td>
<td>7.43</td>
<td>7.458</td>
</tr>
<tr>
<td>PaCO₂</td>
<td>2.05</td>
<td>1.03</td>
<td>1.98</td>
<td>4.08</td>
</tr>
<tr>
<td>HCO₃⁻</td>
<td>5.6</td>
<td>3.6</td>
<td>10.1</td>
<td>21.4</td>
</tr>
<tr>
<td>ABEc</td>
<td>-20.7</td>
<td>-22.5</td>
<td>-12.7</td>
<td>-1.6</td>
</tr>
</tbody>
</table>

Figure 1. The γ-glutamyl cycle
Bilateral Dupuytren’s Contracture of the Foot

C. Newman, S.E. McQuaid
Newman and McQuaid describe a case of plantar fibromatosis in a patient with type 2 diabetes and alcohol excess. There is a strong male preponderance.

Figures 1 and 2. A diagnosis of left sided Dupuytren’s contracture of the hand and bilateral plantar fibromatosis of the feet was made.

A Curious Case of Cough in a Young Woman
Di Giovanni et al describe a 44 year old woman who presented with a cough. The chest x-ray showed a suspicious lesion. The ultimate diagnosis was an inflammatory myofibroblastic tumour (IMT). It was benign and successfully removed at surgery.

Figure 1. CT thorax showing poorly marginated, non-calcified 2.7cm mass in the left upper lobe.
Figure 2. CT-guided core biopsy sample showcasing a spindle cell tumour with numerous plasma cells.

Congenital Atrial Haemangioma

A. Daly, O. Franklin, L. Nölke

Daly et al describe a 3 day old infant with cyanosis. An ECHO showed a right atrial mass. At surgery an atrial haemangioma was excised. The infant made a good recovery.

Letters to the Editor

Down Syndrome with Transient Neonatal Hepatitis
Q. Ali, N. McCallion

Management of Acute Wheeze in a Paediatric Emergency Department

S. Kyne, S. Donohue, E. Ryan

Business in Healthcare Module- a Missed Opportunity in our Trainees’ Development?

C. O’Connell, M.K. O’Reilly, G.J. Nason

Influenza in Children: is there a link with Medical Complications or Inflammatory Markers?

L. Whilta, V. Veitch, K. O’Halloran, F. O’Riordan, E. Murphy, D. Coghlan, B. Elnazir, M. Nadeem

Reader Responses

Reader Response to IMJ Article: “Recession, Austerity and Life Expectancy” by D. Dorling and J. Rigby

J. Hanley

Reader Response to IMJ Article: Codeine Usage in Ireland - “A Timely Discussion on an Imminent Epidemic” by E. McDonnell

C. Kennedy, E. Duggan, K. Bennett, D. Williams, M. Barry

Continual Professional Development

Please take our quiz (link below), at the Irish Medical Organisation to earn extra CPD/CME points.

CPD QUIZ