

DOMAIN 4: MANAGING SAFETY RISKS CHECKLIST CASE

Jay is two weeks into his rotation in the Emergency Department. He is rubbing the alcohol based hand rub into his hands, having just left the room of a patient who will need to be admitted. Troy is a six year old boy with interstitial lung disease who presented with a one day history of fever (to 40 degrees C), headache and a new cough. On physical examination he was tachypneic and tachycardic with diffuse expiratory wheezing. Chest x-ray revealed inflated lung volumes with bibasilar interstitial opacities. His O2 sat was 87 %. Jay suspects Troy has Influenza H1N1 which is the predominant respiratory pathogen currently circulating in the community. The staff agrees. Jay feels good, not only for making the right diagnosis, but for remembering to wear an N95 respirator when seeing the patient. Troy will need a private room with enhanced (N95 respirators) droplet-contact precautions, and oxygen. The infectious diseases service has been called to assess the need for oseltamivir.

Jay is looking for a quiet corner so he can focus on the admission but no space can be found. The nursing station is crowded and loud. A van carpooling children home from school was T-boned at an intersection by a delivery truck that ran the perpendicular stop sign; four children have just arrived by ambulance and the trauma team has converged on the department. Extra help is being called. It is frankly chaotic at the nursing station: the children need blood work and x-rays; O negative blood has been ordered for two and neurosurgery has been called to see the child who was in the front seat. The parents have just heard about the accident and want to know what happened? How is my child? Is she going to be alright?

Amidst all this chaos, Jay has finally connected with the intern on the general paediatrics ward. Jay usually uses the admission checklist for the physician-physician handover process but there were none left in the usual file. He considered asking someone for help in finding one, but was worried that if he asked for help to he would be considered needy and immature, not able to recognize that everyone's attention was directed to the trauma victims and the life-saving measures they required. Jay is reasonably familiar with the content of the checklist; this is about his tenth admission.

He thinks for a moment and finally says to the intern, "let me call you back in a minute. It is so noisy down here I can barely think. I need to get a transfer checklist".

"What do I do now?" he says to himself.