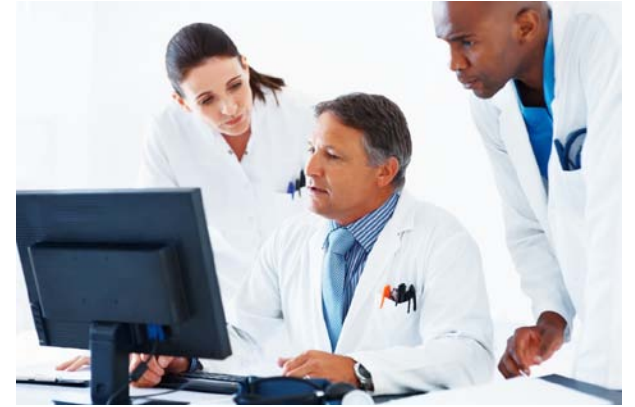


Specialets uddannelsesinitiativer

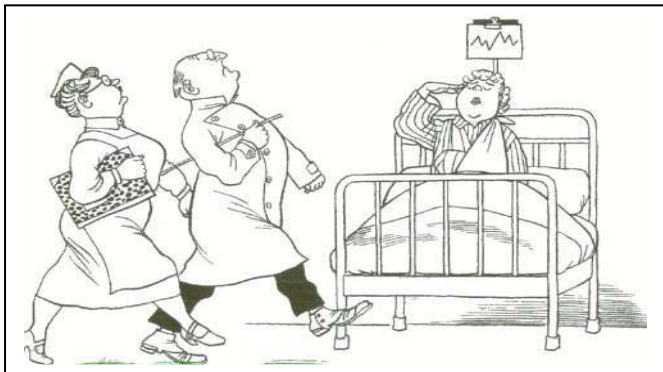
Alle skal gå med deres DECT telefon



Parallelambulatorier i alle subspecialer:
"Senior og junior parallelambulatorium"



STUEGANGSFUNKTION.



Fordele:

Buffertid til andre funktioner såsom vagtkontroller, "aftennat" henviste patienter. Læring fra komplicerede patienter

Ulemper

Indlagte er de sværeste patienter. Ses af de yngre læger og cirkulere af og til uden speciallæge indover

Handlingsplan: Retningslinje om subspecialplacering af akutte indlagte patienter efter drøftelse overlægerne imellem mhp behandlingsansvar

MORGENKONFERENCE.



Fungerer dårligt. Indholdet er ofte: for lidt, forkert, for uprioriteret eller lidt ligegyldigt.

Handlingsplan.

- Dagens case og UAO feedback
- ISBAR genopfriskes

COMMUNICATING WITHIN YOUR HEALTH CARE TEAM	
CLINICAL DETERIORATION	CLINICAL HANDOVER
<p>INTRODUCTION</p> <ul style="list-style-type: none"> • Introduce yourself, your role and location • Identify the patient 	<p>INTRODUCTION</p> <ul style="list-style-type: none"> • Introduce yourself, your role and location • Identify team leader • Clearly identify patient and family and carer if present
<p>SITUATION</p> <ul style="list-style-type: none"> • State the immediate clinical situation 	<p>SITUATION</p> <ul style="list-style-type: none"> • State the immediate clinical situation • State particular issues, concerns or risks • Identify risks - Deteriorating patient, Falls risk, Allergies, limitation to resuscitation
<p>BACKGROUND</p> <ul style="list-style-type: none"> • Provide relevant clinical history and background • Presenting problems and clinical history 	<p>BACKGROUND</p> <ul style="list-style-type: none"> • Provide relevant clinical history referring to medical record and/or eMR
<p>ASSSESSMENT</p> <ul style="list-style-type: none"> • Work through A-G physical assessment • What clinical observations are of particular concern? • What do you think the problem is? • Remember to have current observations and information ready! 	<p>ASSSESSMENT</p> <ul style="list-style-type: none"> • Work through A-G physical assessment • Refer to observations, medication and other patient charts • Summarise current risk management strategies • Have observations breached CERS criteria?
<p>RECOMMENDATION</p> <ul style="list-style-type: none"> • What do you want the person you have called to do? • What have you done? • Be clear about what you are requesting and the timeframe • Repeat to confirm what you have heard 	<p>RECOMMENDATION</p> <ul style="list-style-type: none"> • Recommendations for the shift • Refer to medical record or eMR • Provide expected date of discharge • What further assessments and actions are required by who and when • State expected frequency of observations • Request that receiver read back important actions required

ACCELERERET OG SYSTEMATISERET UDDANNELSE AF YNGRE LÆGER



Ovenstående er baseret på vedtagne initiativer fra Fællesreferat 1 og 2 + handleplaner for 3-timersmødet 2014 i Oftalmologi.