

JMO Self Help

Need Some therapy? – watch the UK TV Series “Cardiac Arrest” – 1990s JMO Cult Classic

- <https://www.youtube.com/watch?v=EIFIhemgeaA>

Need Some Training? Westmead Simulation Lab (SiLECT) is here fore you:

- Every Wednesday at 3 30pm for After Hours JMOs on relief term (and for interested observers)
- ALS course – sign up! – it’s currently a 6 month waiting list...

Use Smart Phone Apps -----

Use FOAM (Free open access medical education)

- www.lifeinthefastlane.com
- www.emergencypedia.com
- www.injectableorange.com



Use MIMS or AMH for all Drug Charts

Chest Pain

- Chest pain – consider 6 lethal causes (e.g. MI, Dissection, PE, Pneumonia, Pneumothorax, Oesophageal Rupture)
- ‘Atypical = Typical’ (Non-cardiac = Non-cardiac)
- A – G approach for all patients with chest pain
- (Serial) ECGs – Call for senior help - get them to sight the ECG
- Call for help (ALS team) for patients with adverse signs including refractory chest pain, shock, extremes of heart rate and cardiac failure. STEMI = an ALS call

Confusion

Confusion and Coma (all altered patients) have an either Structural or Metabolic cause

Follow the A to G assessment, Correct Blood Sugar, Control Seizures, Call for Help early

Negotiation Skills

“Credibility, authority, and being LIKED are powerful persuasion tools”

Suggested Strategies to achieve Conflict Resolution: - 6 Laws of Influence (Ciadini)

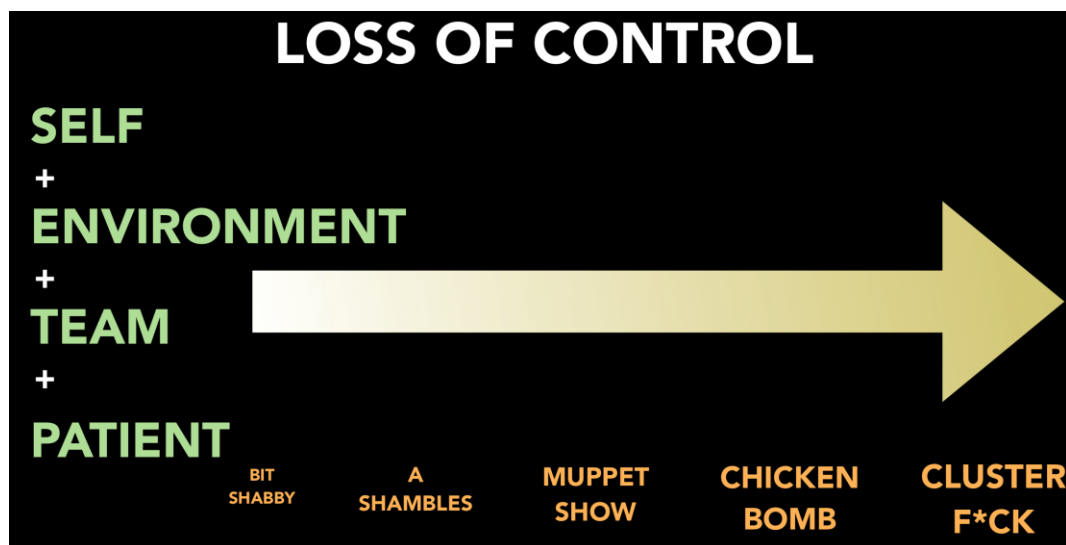
- **Authority**
 - Individuals are more likely to comply with experts/authority
- **Reciprocity** ("Do us a favour")
 - If you give something to people, they feel compelled to return the favour.
- **Scarcity** (this is less applicable to medicine (i.e. rare items are more valuable))
- **Liking**
 - We are more inclined to follow the lead of someone who is similar to us rather than someone who is dissimilar
- **Social Proof** ("Lemmings")
 - We view a behaviour as more likely to be correct if others are performing it.
- **Commitment and Consistency**

Always use ISBAR when handing over in an Emergency. Use Graded Assertiveness where you think the patient is Unsafe **C.U.S.S.** (I am... 'Concerned', 'Unsure', 'Safety', 'STOP')

ALS/Resus Rules

Human Qualities and Persuasion Skills are important in order to prevent chaos in Major ALS scenarios – the default position is chaos. You can help as an intern by recognising the signs of loss of control... Establish your role, a team leader, use names and closed loop communication

The TEAM needs to gain Control of a Potentially Chaotic Situation!



- Think about control of SELF, ENVIRONMENT, TEAM and PATIENT
- Reflect on how you go in these regards after each Emergency/Trauma case you attend.
- **SEE LINK** - <http://resusme.em.extrememember.com/index.php?s=communication>
- Think about:
 - (1) HOW YOU APPEAR
 - BODY LANGUAGE
 - (2) WHAT YOU DO
 - ASK FOR HELP
 - USE THE GROUP
 - (3) WHAT YOU SAY
 - BE AUTHORITATIVE
 - FOCUS ON THE PATIENT
 - (4) HOW YOU SAY IT
 - BE NICE

When arriving at an ALS say – I am Andrew – one of the interns – what would you like me to do to help? (this implies you **will** be of help). Establish your role & support the Team Leader