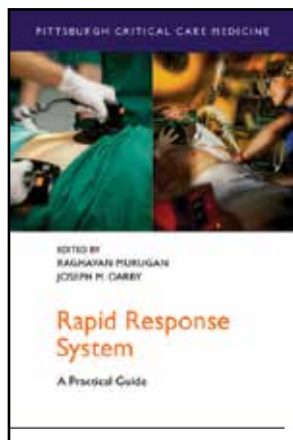


Rapid Response System A practical guide



Published: April 25, 2018

Language: English

368 pages (7.9 x 1.1 x 5 inches)

ISBN-10: 9780190612474

ISBN-13: 978-0190612474

Oxford University Press

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Dr. Raghavan Murugan, associate professor in critical care medicine at the University of Pittsburgh holds the administrative titles of ICU Director & Chief of Critical Care Medicine at Magee-Womens Hospital of UPMC and Director of Clinical and Research Observership Programs at the Department of Critical Care Medicine. He has also received the Presidential Citation Award from Society of Critical Care Medicine in 2015.

Dr. Joseph M. Darby is professor of Critical Care Medicine and Surgery at the Pittsburgh school of medicine. He is former director of rapid response system at the university, while currently he holds the titles of Chief of Critical Care at UPMC Hamot and Co-Director of Neurotrauma Intensive Care Unit at UPMC Presbyterian Hospital. He is receiver of several awards, most recent of them is Surgical Educator Award from Division of Plastic Surgery in 2007. The book is divided into six parts, although, four would be sufficient. The 1st part with the title of "rapid response teams" covers the evolution of rapid response system starting from historical background while defining and discussing the objectives, elements and rationale of the system. The system's activation criteria and limbs are well explained using tables and charts. It also identifies barriers to effective team function and propose their solutions as well.

Second section deals with practical approaches to the evaluation, differential diagnosis and management of commonly presented medical & surgical emergencies such as cardiac arrest, life threatening arrhythmias, respiratory failure, neurological emergencies, sepsis and trauma. Whereas less common conditions like pediatric, obstetric, oncologic and behavioral emergencies are reserved for third part.

Doctors working in ERP will find the part four and five to be the most useful and interesting as well. As the part four uses flow charts and diagrams to elaborate the procedures and flow to manage airway and gain vascular access during emergency situations. After securing airway and vascular access, point of care ultrasonography is presented as an effective tool for rapid diagnosis and resuscitation in ICU. Whereas part five provides guidelines for preparing emergency crash carts, detailed and complete lists for medications as well as airway equipment are presented. Newly introduced portable devices including ultrasonographs, defibrillators and monitors also discussed. Organizational and administrative issues are addressed in part six, which might be of least interest for most of doctors but it helps in understanding the hospital policies and SOPs related to safety and quality control. Doctors with administrative titles may benefit most from this section.

In my opinion this book would be equally helpful for junior as well as experienced doctors working in ERs. There is sufficient material to help nursing staff in arranging and maintaining crash carts and other equipment. For hospital administration, the book can not only help in evaluating performance of ER teams but can also guide in developing SOPs to improve the quality. It also provides updates of equipment that can be used in ERs.

This book is written with medical students, junior physicians and nursing staff in mind working in both academic and community hospital settings. Both a novice and an experienced healthcare provider involved in a rapid response system will find this handbook to be valuable supplement to the clinical experiences gained through active engagement in the system. It would be safe to conclude that the primary audience of the book are professionals working in ERs, but it would also be useful in academic environment particularly for the final year's medical students.

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