

NIB

NURSING INFORMATICS BULLETIN



مؤسسة حمد الطبية
Hamad Medical Corporation

HEALTH • EDUCATION • RESEARCH صحة • تعليم • بحث

إدارة معلوماتية التمريض
Nursing Informatics Department

Volume 7 NO. 7 | June 2017



**NURSING INFORMATICS
INTERNATIONAL CONTRIBUTION:**
HIMSS Middle East International Conference, KSA,
2nd GCC Conference, Qatar

IN PURSUIT OF EXCELLENCE:
Clairvia is Live across HMC



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FOREWORD MESSAGE

Albert Einstein once said, “You can’t solve a problem on the same level that it was created. You have to rise above it to the next level.” Great minds are never satisfied with what they can do, they always strive hard to do what has never been done. In our aspiration to excel, we constantly find ways to improve, innovate and invent. The Nursing Informatics (NI) Department is humbled to partake in innovative projects where nurses will be the center of our accomplishments.

To showcase these projects, the NI Department has participated in the recently concluded 2nd Gulf Cooperation Council (GCC) Nursing Conference with the theme “Evolution of Technology and its Impact on Humane Nursing Care”. Indeed, healthcare has taken a giant leap in terms of technology and Nursing Informatics played a vital role in preparation, implementation and sustainability of these projects. I was also honored that two of our academic posters earned major awards at the same event.

In this edition, we talk about technologies that influence nursing care. We have seen the benefits through of technology Clairvia enhancing staffing decisions and assignment management. Technology has supported nursing staff and, at the other end of the spectrum, has also supported patients. With improvement of patient safety in mind, the Sepsis Program was developed for the early detection and management of patients with sepsis. This can potentially save lives by standardizing sepsis management across Hamad Medical Corporation (HMC) facilities.

Moving forward, I would like to hear from you and find out your thoughts and ideas, topics or any suggestions that you would like us to explore. Send your comments or ideas to our department email address:

✉ nursinginformatics@hamad.qa

EDITORIAL BOARD

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CALL FOR CONTRIBUTION TO (NIB) NURSING INFORMATICS BULLETIN

The Nursing Informatics Bulletin (NIB) publishes articles written by nurses to support the readers in their clinical areas. The topic should be related to nursing informatics and its application. These guidelines offer advice on writing and explain our submission and review process.

1. All articles submitted should adhere to the NI department mission and vision.
2. The editorial team reserves the right to accept or reject any article submitted.
3. Article should be no more than 450 words in length. The editorial team reserves the right to edit articles for length, clarity and compliance with NIB standards.
4. The article should have a title and list the full name and job position or title of the author(s).
5. A photo and brief biography should be submitted with the article.
6. Write short sentences and provide one idea per paragraph.
7. The article should be submitted in word format and emailed to nursinginformatics@hamad.qa stating “NIB Contribution” in the subject field.
8. Approval for the article to be included in the bulletin will be given by the Executive Director of the Nursing Informatics Department.

Dr. Wasmiya Dalhem

Executive Director of Nursing Informatics

Nursing Informatics Participation in 2nd GCC Conference



The 2nd Gulf Cooperation Council (GCC) Nursing Conference was held from 26–27 February, 2017 in Doha, Qatar with the theme: “Evolution of Technology and its Impact on Humane Nursing Care” This event showcased the latest advancements in nursing technology and was graced by nurse leaders from GCC member states. The presentation was led by Dr. Wasmiya Dalhem, Executive Director of Nursing Informatics (NI), who was also one of the Chairs of the Organizing Committee. The department submitted six academic posters and hosted a NI booth where departmental achievements were presented.

During the event, two Nursing Informatics academic posters won an award: first place to a poster entitled: “Oncology Nurses’ Experience with Cerner Clairvia™ A Case Study from Qatar.” Second place went to “Improving Patient and Family Education Compliance in Outpatient Units of Al-Wakra Hospital”. The event took place in the Sheraton Grand Doha Resort and Convention Hotel.

NI Department Participates in HIMSS Middle East International Conference



The NI Department, represented by Ms. Doaa Abdelaal, Informatics Nurse, participated as a speaker at the HIMSS Vision 2030 eHealth & Beyond Exhibition and Conference held in Saudi Arabia from 11 April, 2017. Ms. Doaa presented the nursing informatics project “Nursing Informatics CIS E-Library: Transforming Nursing Education through Technology – a Nursing Informatics Initiative”, highlighting its benefits and positive impact on nursing practice.

Nursing Informatics' Online Support

24/7 support Chat

Nursing Informatics Online Support

On 10 November 2016, the Nursing Informatics Department launched 24/7 online support. The online support is a new feature designed to provide immediate assistance to end users without the need to phone/call NI staff assigned to the facility. The application can be accessed directly through our NI CIS-E Library or through the link ‘NID Online Support’ under the NI Department section in HICT gate. This application will be mainly used to provide assistance to end users by the respective NI staff assigned to each facility.

Monthly - Total Calls

provide assistance to end users by the respective NI staff assigned in each facility.



New NI Interactive E-learning for Ambulance Online Booking

The Nursing Informatics Department always seeks to improve ways to provide training and enhance the learning experience of nursing staff. Interactive E-learning for Ambulance Online Bookings was created and published to the Nursing Informatics CIS E-library. It contains a training module to enable nurses to take self-paced training with practice to help them cope with the challenges of the new system and assess them to gauge their knowledge and level of understanding of the information covered in the course.



Al Khor Prepares for Alaris™ - BD - CareFusion Integration to Cerner

From 23–27 March 2017 - Al Khor Hospital (AKH) prepared Alaris infusion management by training nursing end users on the Alaris Interoperability. The training was divided into two parts: The first part was handled by the Alaris vendor teaching the technical functionalities of the device. The second part was conducted by Nursing Informatics and linking the device to the patient and integrating the information to the Cerner were taught. This is part of the ground-work for Cerner Care Aware implementation in the near future.

HGH live With Clairvia Staff Management Solution

Hamad General Hospital has implemented Clairvia Workforce management. The implementation was divided into two phases: the 1st phase on 1st May 2017 was the schedule editor and daily editor utilized by all nursing units. The 2nd phase took place on 22nd May 2017 and was the assignment manager utilized by inpatient units.



NCCCR Launched Ambulance Services Online Booking

The National Center for Cancer Care and Research (NCCCR) went live with the Ambulance Services Online Booking on 2 April 2017. The e-booking system was supported by a collaborative team from Nursing Informatics and HMC Ambulance Services. With the new e-booking system, nurses will be able to send requests online to HMC Ambulance Services. The ambulance e-booking portal can be accessed through HICT Gate Ambulance Services.

Winner of the NIB Quiz / Volume No.5



We are pleased to announce the winner of the 5th edition NIB Quiz:
Mr. Abdulqadir Jeprel Japer Nashwan, Nurse Research Scientist in NCCCR
Congratulations to Mr. Abdulqadir!
All HMC Staff can be winners!



Nursing Informatics Calendar of Events

NURSING
INFORMATICS
EDUCATION
COMMITTEE

ICDL Schedule (27 CPD)

- August 13-17, 2017
- October 8-12, 2017
- August 24-31, 2017
- October 22-26, 2017
- Sept 17-21, 2017

Microsoft Excel and
Dashboard (10 CPD points)

- June 11-12, 2017
- September 10-11, 2017
- June 18-19, 2017
- September 24-25, 2017
- August 20-21, 2017
- October 1-2, 2017
- August 22-23, 2017
- October 15-16, 2017
- September 4-5, 2017
- October 29-30, 2017

Dialysis and OPD

- June 07, 2017
Cerner Training
- June 12, 2017
Cerner Refresher Day
- July 24, 2017
Clairvia Refresher Session

Rumailah and Enaya

- June 07 and 21, 2017
Improving Nursing Documentation
- June 15, 2017
Cerner Clairvia Training
- June 28, 2017
Cerner Refresher
- July 26, 2017
Clairvia Refresher Session
- July 12, 2017
Nursing Informatics Sub Committee Meeting
- July 13 and 25, 2017
Improving Nursing Documentation

HGH Facility

- June 18 to 21
New Staff Cerner Training
- July 19-20, 2017
Cerner Clairvia Training

NCCCR

- June 01, 2017
Cerner Refresher Day
- June 13, 2017
BCMA Training
- June 21, 2017
Cerner Training
- July 18, 2017
Cerner Refresher Day

CERNER NEW
STAFF AND
REFRESHER
TRAINING
SCHEDULECLAIRVIA OTL
INTEGRATIONRumailah
HospitalAl Wakra
HospitalAl Khor
HospitalAcute Care
Facility for
Mental Health
Services

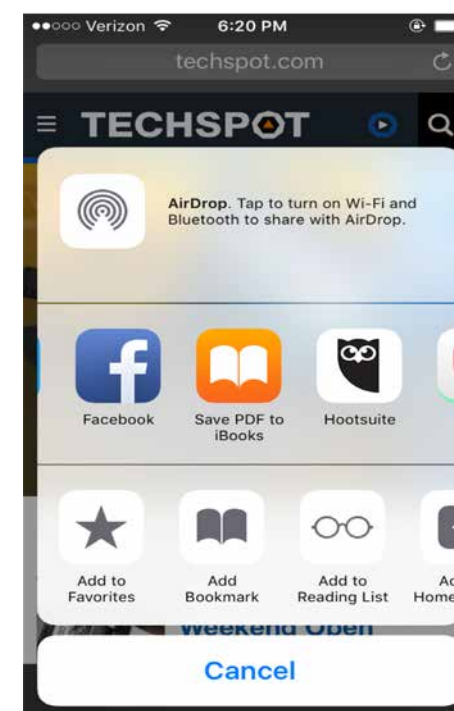
AUGUST 2017



iPhone Shortcuts

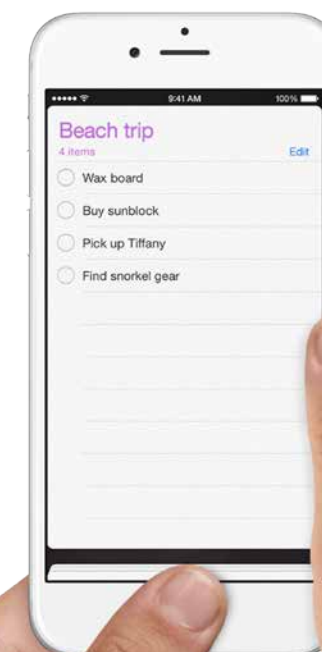
Make a website PDF:

From Safari, hit the 'Share' button. On the top row you'll see "Save PDF to iBooks" (you might have to swipe left to see it). Once you tap the button, you can share the PDF from the iBooks app.



Take a screenshot:

Press and hold the Sleep/Wake and Home buttons at the same time. You'll hear a sound and see the screen go blank for less than a second indicating that the screenshot has been saved. You can find the screenshot in Photos.

Evidence-Based Management:
THE RIGHT WAY TO MAKE A RIGHT DECISION

By: Ali Nasseem Nursing Informatics Specialist

We will all at some point need to make decisions in our personal and professional lives.

We need to realize the importance of learning a methodology that helps us make the right decision. When we say a decision we mean a choice made between alternative courses of action in a situation of uncertainty.

Of course, there are many decision-making models and approaches due to different perspectives such as medicine, nursing, quality, management, etc.

But all of it revolves around one goal which is making the right decision by using the best available evidence and information from different sources.

The Center for Evidence-Based Management states four areas to be taken into account:

• Scientific evidence

Findings from published scientific research.

• Organizational evidence data

Facts and figures gathered from the organization.

• Experiential evidence

The professional experience and judgment of practitioners.

• Stakeholder evidence

The values and concerns of people who may be affected by the decision.

It is important to follow evidence-based decision steps:

1 Recognize the need for a decision.

2 Frame the problem accurately.

3 Generate and assess alternatives - develop feasible alternatives and determine the advantages and disadvantages of each.

4 Choose options - consider all the information and rank it.

5 Implement the chosen option.

6 Learn from feedback - what went right and wrong.

Once we gain confidence in making decisions, we will feel more comfortable making decisions in the future, taking into account the best available evidence and ethical and legal considerations.

Reference:

<http://www.cebma.org>

* Barebds, E. Rousseau, D.M, \$ Brinar, R.B. Center for Evidence-Based Management

How Communication Improves PATIENT HEALTH LITERACY



By: Aamna Hamid, Nursing Informatics Coordinator

The Institute of Medicine defines health literacy as the degree to which individuals can obtain, process, and understand basic health information and the services they need to make fitting decisions about health.

More recent definitions of patient health literacy focus on specific skills needed to navigate the healthcare system and the importance of clear communication between healthcare

providers and their patients. Both healthcare providers and patients play important roles in health literacy. Communication processes in healthcare have undergone dramatic changes

through the use of electronic means of communication. Nurses are increasingly using electronic devices to communicate with healthcare providers, patients and their families.

Various devices are used such as cell phones, smartphones, tablets, monitoring equipment and bedside computers.

Communication accomplished with such devices includes direct verbal communication, text-messaging, emailing, obtaining patient care information and accessing medical records, finally, providers can consult with other health professionals who are caring for a patient or can seek "specialty" consults through use of electronic communication.

METHODS TO IMPROVE PATIENT HEALTH LITERACY

Social Network

Social networks hold a lot of promise in improving health literacy and patient engagement, as well as developing a sense of community, as the fundamental purpose of social networking is to increase communication and connection. According to C. Lee Ventola, in 2014 around 80 percent of patients were using the Internet, and subsequently social media and blog sites, to get healthcare information¹. This information reveals a huge communication space where healthcare providers can inform their patients of good health habits and information on potential problems they may be having. Also, it can help:

- Increase patient satisfaction due to improved communication.
- Build a network of people supporting each other toward better health.
- Improve patient education and health literacy.

An example of a social networks site is Twitter. A study conducted in 2012 reveals that Twitter is a powerful medium capable of connecting cancer patients via the establishment of a patient network. Twitter users with a variety of types of cancer have proved influential on their followers, as demonstrated through the information exchanged by account owners and their followers.

Online Patient Education

Patients' access to health information has increased on Internet sites even though they may lack the ability to judge the quality of the information obtained⁴. Providers also have easy access to updated information through online reference materials and clinical practice guidelines.

In 2013, over 2.7 billion people were using the Internet, which corresponds to 39% of the world's population as per the International Telecommunication Union–The world in 2013 ICT facts and figures report². That increases the opportunities to improve health literacy through trusted sites.

Overall, individual Internet access has increased in Qatar to reach 88 percent with around 24% of the users searching the Internet to get information related to health/services.

Reference:

1. <http://patientengagementthit.com/news/3-ways-social-media-in-healthcare-can-improve-patient-engagement>
2. <https://www.itu.int/en/ITU-D/Statistics/Documents/facts/ICTFactsFigures2013-e.pdf>
3. http://www.ictqatar.qa/sites/default/files/documents/Qatar%20ICT%20Landscape_EN.pdf
4. Angaran, D. (2006). Electronic communication in health care,
5. Margalit, R. S., Roter, D., & Dunevant, M. A. (2006). Electronic medical record use and physician–patient communication: An observational study of Israeli primary care encounters. *Patient Education and Counseling*, 134–141

Patient Portal

One of the potentially transformative healthcare technologies is the patient portal. Typically, it provides patients with online access to health information, services, and clinical care.

Some existing portals include web links to reliable sources of medical information, and the ability to make appointments, obtain managed care referrals, and request medication renewals. Some sites also offer patients electronic access to their own medical records including patient's laboratory and radiology results, and the capability for secure electronic messaging.

Providers can also communicate directly with patients and provide individualized patient care through e-mail consultations. Studies of patient web sites suggests that patients may particularly value secure messaging with physicians and access to medical records.

Introduction to Nursing Informatics Competencies THE TIGER INITIATIVE



By: Sherman Dumaguin, Nursing Informatics Coordinator

As computing becomes more widespread, all nurses must be both information and computer literate. (Scope and Standards of Practice, ANA 2008). Clinical information systems are no longer optional but necessary for all nursing practice environments. Nursing Informatics Competencies is a tool that assesses a nurse's ability to obtain, store, retrieve and communicate data, information, knowledge and wisdom including basic computer skills which is essential in nursing practice. (H. Greer, 2012).

The Technology Informatics Guiding Educational Reform (TIGER) Initiatives developed a set of minimum informatics competencies that all nurses need to practice to serve as the foundation for evidence based practice and clinical decision support.

What is TIGER?

TIGER (Technology Informatics Guiding Education Reform) is focused on education reform and inter-professional community development. The spirit of TIGER is to maximize the integration of technology and informatics into seamless practice, education and research resource development. TIGER transitioned to HIMSS in 2014.

What are the Nursing Informatics Competencies?

The set of nursing informatics competencies published by the TIGER Initiative contains three categories of competencies:

- Basic Computer Competencies.
- Information Literacy.
- Information Management.

What are Basic Computer Competencies?

Basic Computer Competencies has adopted the European Computer Driving License (ECDL) syllabus items and recommend the following as a first step to basic computer proficiency for all practicing nurses. ECDL is similar to ICDL (International Computer Driving License). The Nursing Informatics Department has taken the initiative to provide the ICDL Preparatory Course which is offered to nursing staff in preparation for the actual ICDL course.

ECDL Modules

1. Concepts of Information and Communication Technology (ICT).
2. Using the Computer and Managing Files.
3. Word Processing.
4. Spreadsheets.
5. Using Databases.
6. Presentation.
7. Web Browsing and Communication.

TIGER Nursing Informatics Competencies Model

COMPONENT OF THE MODEL	STANDARD	SOURCE (STANDARD-SETTING BODY)
Basic Computer Competencies	European Computer Driving License	European Computer Driving License Foundation www.ecdl.org
Information Literacy	Information Literacy Competency Standards	American Library Association www.ala.org
Information Management	Electronic Health Record Functional Model – Clinical Care Components	Health level seven (HL7) www.hl7.org
	International Computer Driving License – Health	European Computer Driving License Foundation www.ecdl.org

What is Information Literacy?

Information literacy is defined as a set of abilities allowing individuals to recognize when information is needed and to locate, evaluate and use that information appropriately. – The Association of Colleges and Research Libraries, 2000
The nurse must be able to determine what information is needed.

This involves critical thinking and assessment skills. Finding the information is based on the resources available, which can include colleagues, policies, and literature in various formats.

Components

1. Determine the nature and extent of the information needed.
2. Access the needed information effectively and efficiently.
3. Evaluate information and its sources critically and incorporate selected information into a knowledge base and value system.
4. Individually or as a member of a group, use information effectively to accomplish a specific purpose.
5. Evaluate outcomes for the information.

What is Information Management?

Information Management is a process consisting of collecting and processing data, and presenting and communicating the processed data as information or knowledge.

An underlying concept for information management is the data-information-knowledge continuum. The most relevant, important, and fundamental information management competencies for nurses are those that relate to the electronic health record system (EHRs).

References:

1. <http://www.himss.org/professionaldevelopment/tiger-initiative>
2. http://tigercompetencies.pbworks.com/f/TICC_Final.pdf
3. <http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Volume62001/No2May01/InformationLiteracy.html>
4. <http://www.sciedu.ca/journal/index.php/jnep/article/viewFile/2098/1669>

coming together is a
BEGINNING

keeping together is
PROGRESS

working together is
SUCCESS

Dr. Wasmiya Dalhem

Executive Director of Nursing Informatics



HEALTHCARE AND NANOTECHNOLOGY



By Senthil Kumar Sabapathy; Nursing Informatics Specialist

Nanoscience and nanotechnology are the study and application of technology conducted at a nanoscale, of extremely small things – about 1 to 100 nanometers (A nanometer is a value that equals to one billionth of a meter). It can be used with all the other science fields, such as chemistry, biology, physics, materials science, and engineering.

Physicist Richard Feynman, the father of nanotechnology.

Nanotechnology in Medicine

Ideas and concepts behind nanoscience and nanotechnology started with a talk entitled "There's Plenty of Room at the Bottom" by physicist Richard Feynman at an American Physical Society meeting at the California Institute of Technology (CalTech) on December 29, 1959. This was long before the term nanotechnology was used when he described a process in which scientists would be able to manipulate and control individual atoms and molecules. It wasn't until 1981, with the development of the scanning tunneling microscope that could "see" individual atoms that modern nanotechnology began.

Working at such a minute level has lots of advantages over conventional technology which was an important factor in popularizing nanotechnology. In this respect, numerous devices and mechanisms developed with the aid of nanotechnology that could assist in curing diseases/disorders in a more efficient manner. Nanotechnology was utilized particularly for radiation therapy in cancer treatment which requires the accurate targeting of affected cells. However, currently nanotechnology is also making significant progress in the field of medicine such as repairing body cells, efficient drug delivery replacing abnormal genes, and non-invasive imaging tools.

EARN CPD POINTS - ATTEND AN ICDL AND DASHBOARD COURSE
Contact the NI staff member assigned to your facility

Repairing Body Cells Becomes Easy

Nanotechnology is used in the construction of miniscule devices and robots (nanobots) capable of entering the human body and performing a variety of operations; of which cell repairing is one. It is used to repair damaged heart tissues in addition to unclogging cholesterol-filled arteries. Historically, bone injuries take quite a long time to heal. In the past, scaffolds which are tools used for assisting the process of bone healing, were used. However, with the use of polymers, scaffolds containing stem cells have sped up the healing process.

Efficient Drug Delivery

Nanotechnology can be used for the timely delivery of medicines. The drug delivery system for a particular patient can be customized and pre-programmed in order to make it effective. Devices used for implementing the delivery of drugs are known as 'nanovehicles'. Some examples of nanovehicles are microchips, layer-by-layer assembled systems and microneedle-based transdermal therapeutic systems.

Replacing Abnormal Genes

Nanotechnology has proven to be of great assistance in the replacement of abnormal or disease-causing cells, which has raised the possibility of dealing with genetic diseases. In this field, nanotechnology is used for replacing abnormal genes (responsible for diseases) with healthier or normal ones for patients suffering from cancer.

Non-invasive Imaging Tools

Nanotechnology techniques are not used for replacing existing imaging methods, but to complement them and improve their accuracy. Imaging techniques which use nanotechnology depict the actual processes related to diseases at a molecular level. Nanotechnology has raised many possibilities in the treatment of diseases, cell repair, gene therapy, etc.

As technological developments continue to take place at a rapid pace, the scope of development in nanomedicine seems virtually unlimited.

Reference
<http://www.buzzle.com/articles/nanotechnology-advantages-in-medicine.html>

MS. JUZETTE BULURAN

Ms. Juzette Buluran Somera holds a Bachelor of Science in Biology and Nursing and worked in the field of Medical Surgical Nursing in the Philippines. She joined Hamad Medical Corporation in October 1995. She has been working in Qatar for the last 21 years, where she held different positions as a Staff Nurse I, II, and III in the Medical Unit of Hamad General Hospital from 1995 to 2004. She was transferred to Al Khor Hospital where she held the position of Acting Charge Nurse and was later, promoted to Charge Nurse for West 2-Medical Unit. Currently she is the Head Nurse of West 1- Pediatric, Orthopedic, Plastic Surgery Unit. She was one of the Al Khor Hospital staff nominated to be a Subject Matter Expert for the Clinical Information System from the kick off in July 2012 and was also a Super User before the Go Live in March 2014.

Is this the first time you used a Clinical Information System (CIS) in your nursing practice?

Yes. But before the CIS introduction, Nursing Informatics helped us prepare by enhancing our IT knowledge and skills to transform our care to the next level by using the Clinical Information System.

Tell me your experience working with the CIS/CERNER application instead of using paper documentation?

As Subject Matter Experts (SME) of the Carenet solution group, we contributed by providing our knowledge and experience when on a paper-based system. With Cerner, less written notes are required.

Do you think that the use of the CIS application in your current practice helps you improve the quality of care you provide to your patients?

Yes, definitely. The CIS application helps reduce errors especially in medication administration. Whenever a patient's condition changes or there are any abnormalities in the vital signs and laboratory results, the system alerts the care provider for prompt action. Nurses have become more aware of the importance of entering accurate information. The system is secure as only qualified care providers can access.

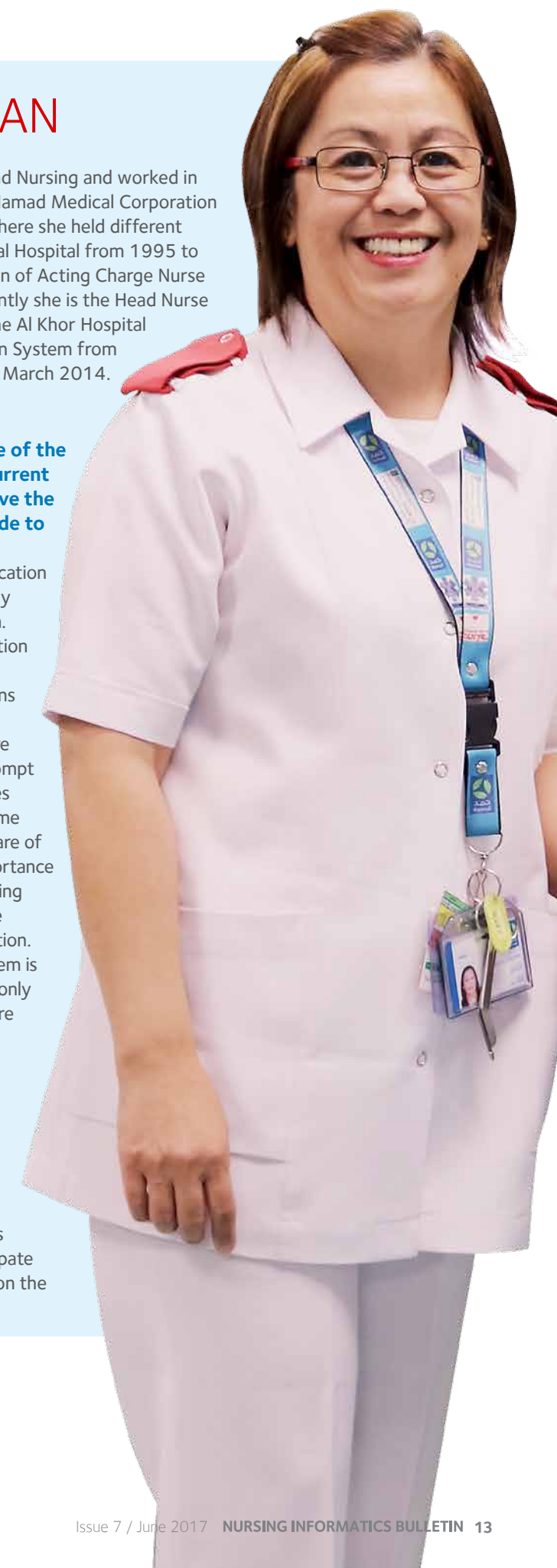
What challenges or problems did you find using our current CIS Cerner Application?

The introduction of CIS itself is a challenge. For example, convincing staff that using the system will lighten their daily work especially for documentation. During power outages and CIS downtime where the system was either down or works very slowly, work is duplicated as we need to use paper forms as a back up and upload them later to the system.

How do you think we could make our CIS system even better?

Any new processes or enhancements should be conveyed to all the facilities so staff can actively participate and give prompt feedback on the process and issues.

Hamad Medical Corporation (HMC) successfully implemented the new CIS Cerner Millennium platform across all its facilities. In order to obtain staff feedback about the effectivity of the new system, the Nursing Informatics Department has decided to launch the User Corner as a regular feature in the NIB.



HMC Adult
SEPSIS PROGRAM

By: Hany Abdelsalam Ibrahim Abdelsalam, Nursing Informatics Coordinator

Sepsis is a life-threatening medical condition arising after a severe infection. Widespread infection releases various chemicals to fight the invading infectious agents in the blood stream and thus triggers a widespread inflammatory reaction. Sepsis may further progress to septic shock where there is an excessive fall in blood pressure which may eventually lead to the person's death.

It is estimated to be one of the leading causes of potentially preventable mortality worldwide, ranging from 22% - 78% (Fleischmann, 2015; Levy et al, 2012; Vincent et al, 2014). As evidenced by the sepsis audit that was done at HMC in 2015, almost 1000 cases of sepsis are admitted annually. According to the HMC Mortality Review 2016, sepsis-related mortality is around 28-30% proportionate to overall mortality. Based on the valuable data from the Qatar Early Warning System (QEWS), it was important to standardize the program across HMC to recognize and manage patients with sepsis. The Sepsis Program is a system-wide electronic health record (EHR) alert for early recognition of patients developing sepsis.

The program aims to help to decrease sepsis in-patient length of stay, reduce the number of ICU days; and reduce complications and adverse outcomes (Daniels, 2011; Khan and Divatia, 2010; Levy et al, 2014; Rhodes et al, 2015; Singer et al, 2016; Vincent et al, 2014).

The program is divided into 2 phases:

Phase 1: All adult inpatient and ED sepsis cases across HMC.

Phase 2: All pediatric inpatient and ED sepsis cases across HMC.

How you can treat Sepsis within one hour

In order to confirm a sepsis diagnosis and treat it well it is important to take

rapid action within the first hour of diagnosis. Six elements of care should be completed within the golden hour. This is called the Sepsis Bundle.

HMC SEPSIS 6BUNDLE

- 1 OXYGEN:** Titrate O2 saturations to 94-98% or 88-92% in chronic lung disease.
- 2 CULTURES:** Take blood cultures before giving antimicrobials (if no significant delay i.e. > 45 minutes and consider source control)
- 3 FLUIDS:** 500ml bolus balanced crystalloid over 15 minutes and give up to 30ml/kg/dose; reassessing for signs of hypovolemia, euvoemia, or fluid overload.
- 4 BLOODS:** Check point of care (POCT) lactate and full blood count. Other tests and investigations as per history and examinations.
- 5 ANTIMICROBIALS:** Give IV antimicrobials according to local antimicrobial guidelines.
- 6 URINE OUTPUT:** Assess and monitor regularly; hourly measurement (septic shock) and obtain point of care (POCT) urinalysis or urine dipstick if POCT is not available.

Reference
http://jamanetwork.com/journals/jama/fullarticle/2492881?utm_campaign=articlePDF&utm_medium=articlePDFlink&utm_source=articlePDF&utm_content=jama.2016.0287



Know your Internet browser shortcuts



There are dozens of different shortcut keys that can be used with Internet browsers. Below are the top suggested Internet browser shortcuts.

- Press **Alt+D** or **Ctrl+L** to move the cursor into the address bar.
- Hold down the **Ctrl** key and press the **+** or **-** to increase and decrease the size of text. **Ctrl+0** will reset the text.
- Press the **backspace** key or press **Alt** key + **left arrow** to go back a page.
- Press **F5** or **Ctrl+R** to refresh or reload a web page.
- Press **F11** to make the Internet browser full screen. Press **F11** again to return to the normal view.
- Press **Ctrl+B** to open your Internet bookmarks.
- Press **Ctrl+F** to open the 'Find' box to search for text within the web page you are reading.

Nursing Informatics Team Participate in 2nd GCC Conference



Nursing Informatics participating in the Qatar Career Exhibition



Clairvia Training



Nursing Informatics Research Evidence-Based Practice Seminar



COMMON IT TERMS

1. Which vehicle can also transport data?

- a) Bus
- b) Car
- c) Plane
- d) Ship

2. Which vegetable come in the Enterprise Java flavor?

- a) Beans
- b) Peas
- c) Broccoli
- d) Potatoes

TRY THIS AND WIN A PRIZE

1. CVM was developed to be flexible enough to accommodate even the most demanding schedules and to be useful to a variety of departments. The application allows users to define the following items:

- a) Names of staff
- b) Names of key data elements, such as assignments
- c) Skills associated with employees
- d) Unlimited number of user fields to store data about employees, assignments, tasks, skills, and groups
- e) All of the above
- f) All except A

Send your answer to NursingInformatics@hamad.qa

Nurstoons

by Carl Elbing



www.nurstoon.com

2030 EHEALTH AND BEYOND April 2017 Riyadh, KSA



5 Ways to Screenshot in Windows 10

- 1 Alt + Print Screen
- 2 Win + Print Screen
- 3 Win + H
- 4 Windows + Volume Down
- 5 Snipping Tool



6 tricks to free up space on your iPhone

- 1 Clear your browser cache
- 2 Stop the Photo Stream
- 3 Delete downloaded music
- 4 Delete downloaded podcasts
- 5 Stop storing texts forever
- 6 Don't double-save photos



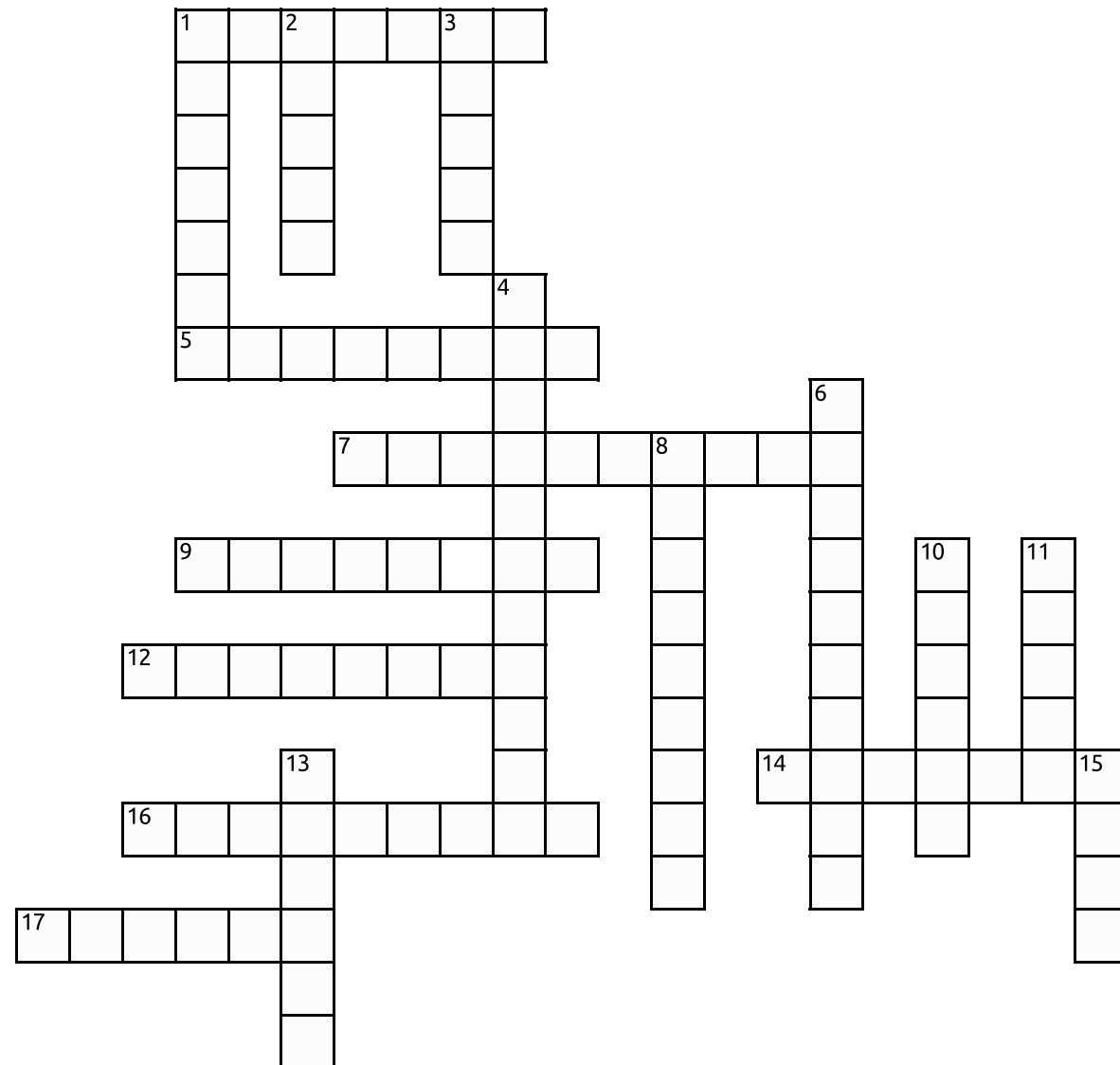
CLAIRVIA TERMINOLOGY - COMPLETE THE CROSSWORD BELOW

ACROSS

1. Function in 'Schedule Editor' that releases the final schedule to be viewed by employees.
5. A person assigned to a location or task for a set period of time known as a task.
7. The act or process of dividing something into parts.
9. A model or original used as an archetype.
12. Method by which the program notifies a user that a desired action may violate one of the existing parameters.
14. A program function where an employee's desired task is recorded.
16. The allocation of FTEs among positions by skill.
17. The number of FTEs authorized by skill as of an effective date.

DOWN

1. A subset of the information in the program database.
2. To prevent from scheduling as a task.
3. A period of time during which a person performs a task.
4. A task that, along with the origin, is staffed by rules.
6. Contain tasks, which are staffed based on the rules stored in the database.
8. A sub-program that allows the program to communicate with other computer systems.
10. Workload methodology based on a fixed ratio of care for each patient.
11. A condition under which an employee will or will not work two tasks.
13. A function that allows users to narrow search results according to pre-determined parameters.
15. A job or duty that is staffed in the program.



Correct Answer to the NIB 6th edition NIB Quiz.

Question 1:
Cruetzfeldt-Jacob Diseases

Question 2:
Personal Computer

Question 3:
Charles Babbage

Hill-Rom

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THE ONLY ONE OF ITS KIND IN THE WORLD Seca 456 WA transmits data from seca 360° wireless products to Welch Allyn vital signs monitor:



Recording vital signs is a part of nearly every medical examination. Now a patient's height and weight can be wirelessly transmitted from a seca 360° wireless measuring device directly to a **Welch Allyn Connex® monitor**. No other product system offers wireless transmission of height and weight to a patient

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Connex® Vital Signs Monitor to measure End-Tidal CO2 along with Respiration rate and integrated pulmonary index



Welch Allyn Connex® Vital Signs Monitor with Covidien® Microstream® Capnography (etCO2) Proactively monitor patient status 24/7 to help

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Acquisition expands Hill-Rom's diagnostic cardiology franchise in the acute care, clinical research and primary care settings.



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See how this unique therapy system mobilises retained pulmonary secretions and treats airway clearance dysfunction through high-frequency chest wall oscillations.



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Be one of the first to experience the new Monarch™ Airway Clearance System from Hill-Rom combining mobility with proven therapeutic performance, it uses revolutionary targeted kinetic energy technology to move secretions up and out. The Monarch™ Airway Clearance



System is battery powered, so can be worn almost anywhere while receiving therapy.

"IT'S AN INTELLIGENT CARE SYSTEM..."

Using clinical scenarios and merging them with IT to bring information to the fingertips of the caregivers and to revolutionize the way we deliver care."

Patient handovers are always a risky moment in a patient's care journey, whether the move is from care team to care team or from acute care to post-acute care.

accurate display of patient risks, allergies and precautions directly from the EMR to an electronic sign outside the patient room.

The new Hill-Rom Care Sign solution takes the guesswork out of patient signage by delivering a real-time,

When data is tied to the patient, caregivers can spend more time treating the patient and less time worrying about safety issues.





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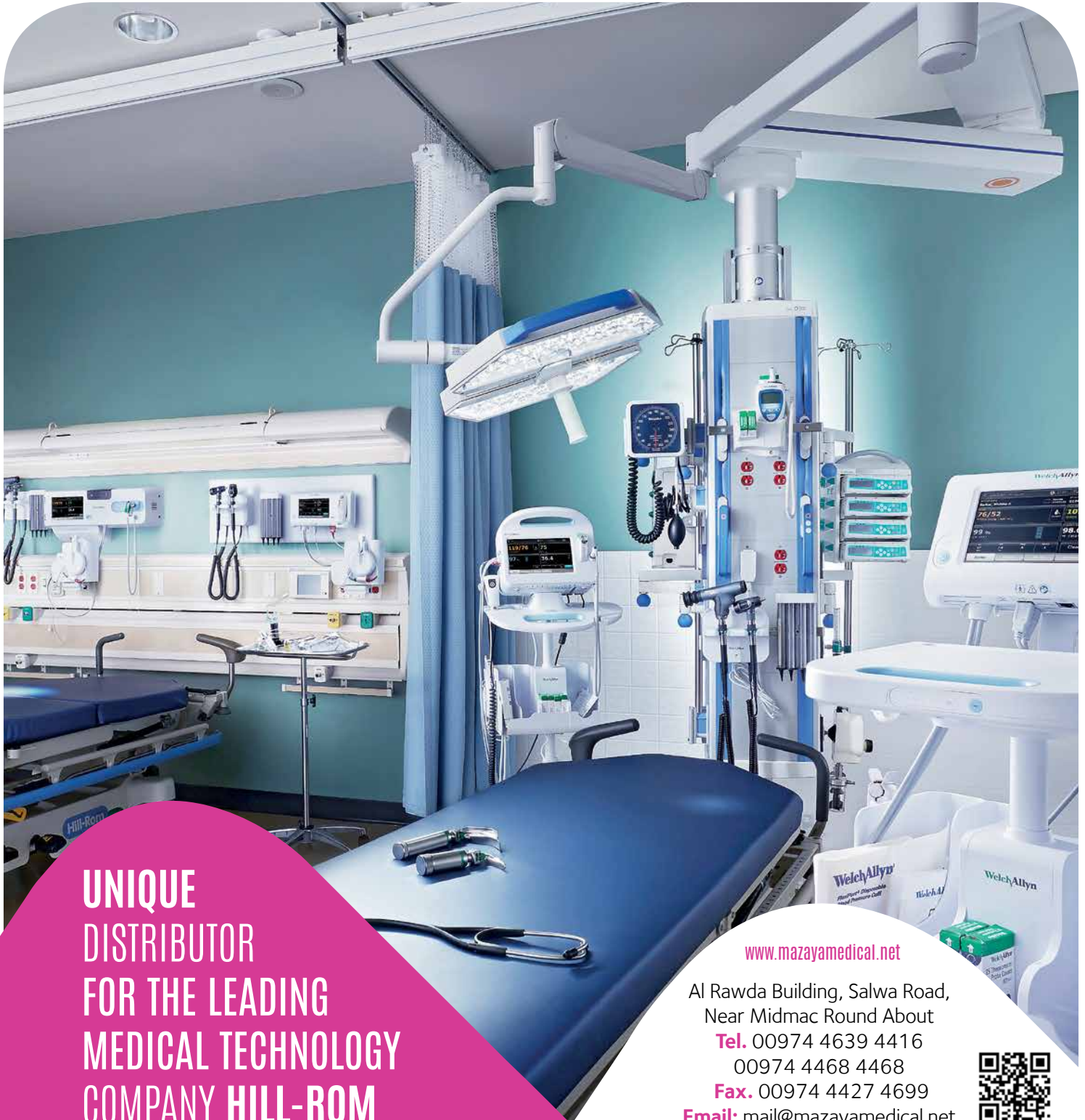
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