MI123: CLINICAL SEMINAR I

Lecture #3

1

Professionalism

Communication

Emergency Responses

Points of Discussion

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Professionalism

Professional Ethic –

Publicly displayed ethical conduct of a profession, usually embedded in a code of ethics: affirms the professional as an independent, autonomous, responsible decision maker

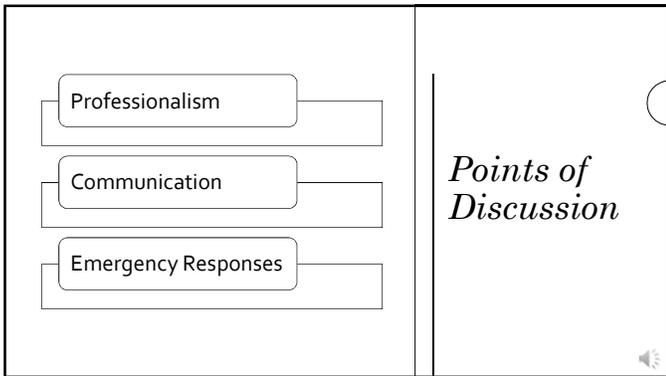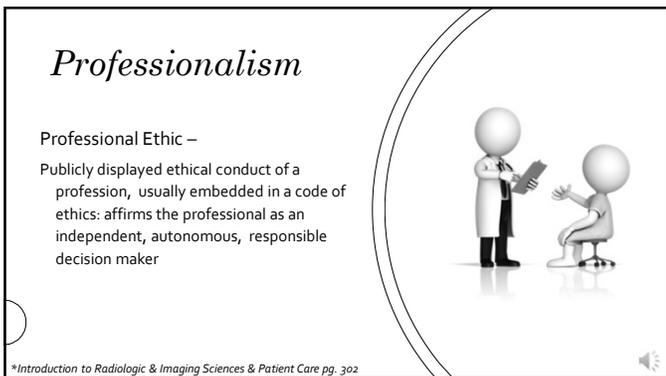*Introduction to Radiologic & Imaging Sciences & Patient Care pg. 302*

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Professionalism

Requires familiarity with several concepts
– Codes of ethics
– Values
– Patient-professional interaction models
– Patient's rights

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Code of Ethics

What is the purpose?
– Helps to ensure a high standard of practice
– Serves as regulatory function: specifying a certain conduct by which all members must abide by (ASRT/ARRT)
– Presents a framework for a systematic examination of beliefs

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Codes of Ethics for Radiography

Code of Ethics

- *ARRT* – American Registry of Radiologic Technologists
  – Part A & Part B
    • *Introduction to Radiologic Sciences and Patient Care: Appendix D, p. 339*
- ASRT – American Society of Radiologic Technologists
  – *Practice Standards for Medical Imaging and Radiation Therapy*
    • *Introduction to Radiologic Sciences and Patient Care: Appendix A, pp. 327-335*

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Values

Definition

– Ideals and customs of a society toward which the members of a group have an affective regard; a value may be a quality desirable as an end in itself

Value System:

– Collection or set of values that an individual or group has as each person's personal guide

*Introduction to Radiologic & Imaging Sciences & Patient Care pg. 303

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Basic Groups of Values

Personal	Beliefs/Attitudes that provide a foundation for behavior and the way an individual experiences life
Cultural	Specific to a people or culture
Professional	General attributes prized by a professional group

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Patient-Professional Interaction Models

• What are they?

– An aid in ethical decision making

– Describe interactions with patients

• Some models may work better than others or in combination with one another.

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Patient-Professional Interaction Models

- _Engineering_ - Defines the patient as a condition or procedure (not person)
- _Paternal/Priestly_ - The caregiver acts in a paternalistic role and makes decisions _for_ patients rather than _with_ patients

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Patient-Professional Interaction Models

- _Collegial_ - More cooperative method of providing health care involving sharing, trust, and the pursuit of common goals
- _Contractual_ - Defines health care as a business relationship between the provider and patient
- _Covenantal_ - Agreement between the patient and health care provider
  - Patients best interests in mind
  - Patients ability to trust is often based on past experiences with health care providers

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Health Communication

Concerned with how individuals in a society seek to maintain health and deal with health-related issues
- Key Elements of Communication
- The speaker or sender
- Language spoken or body language
- Environment
- Listening
- Feedback from receivers

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Obstacles *in* Communication

- Interruptions/distractions
- Visually impaired, speech and/or hearing impaired
- Cultural factors and/or language barriers
- Seriously Ill/Traumatized
- Mentally impaired
- Substance abusers
- Relationship concerning roles

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Improving Communication

Constantly evaluate and improve communication skills

Active Listening
- Watching the patient's body language
- Observing the patient's physical presentation
- Asking open-ended questions
- Waiting for responses and feedback from the patient
- Speak in simple terms easily understood (non-medical jargon)
- Time
- Educate

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Patients Rights

The Patient Care Partnership
- Published by The American Hospital Association
- Helps patients understand their expectations, rights and responsibilities
- Outlines what patient's are to expect during their stay in the hospital:
  - High quality care
  - Clean and safe environment
  - Patient to be involved in their care
  - Protection of privacy
  - Preparing patient and their family to leave the hospital
  - Help with bill and insurance claims

Introduction to Radiologic Sciences and Patient Care Appendix F, pp. 346-347)

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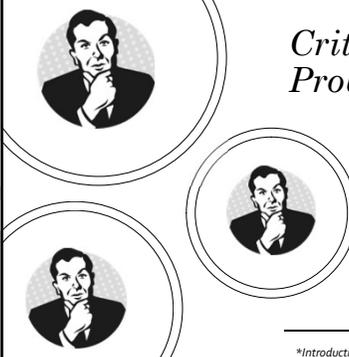
Critical Thinking & Problem Solving

Critical Thinking Definition:

– Creative thinking based on professional knowledge and experience involving sound judgment applied with high ethical standards and integrity.

What does that mean?

Identify, Investigate, Formulate Solution, Select the Solution***

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Critical Thinking & Problem Solving

Learning extended beyond memorization

Steps in Critical Thinking:

• Identify the Problem

• Investigate the Problem

• Formulate a Solution

• Select the Solution

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TABLE 4.1 Steps in Critical Thinking and Problem Solving

CRITICAL THINKING & PROBLEM SOLVING
*Identify, Investigate, Formulate Solution, Select the Solution***

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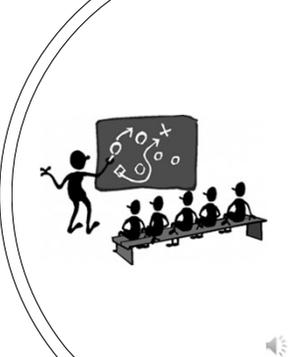
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How can this be useful now?

Classroom/Skills Lab
– Freedoms without endangering the health of a patient

Clinical Setting
– Allows knowledge of problem solving to be used in a *real-world* environment (being reinforced by a supervising technologist)

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Joint Commission on Accreditation of Healthcare Organizations --1951

- *Mission*: To continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value.

The Joint Commission

- *Vision Statement*: All people always experience the safest, highest quality, best-value health care across all settings.
  – Consistency

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Joint Commission on Accreditation of Healthcare Organizations --1951

- Accredits and certifies more than 20,000 health care organizations and programs in the United States.
  – Recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards.

The Joint Commission

  – Standards have been introduced in 2016 that are more specific to Radiology
    - MRI, CT, etc.
    - Could be more in the future with Fluoroscopy

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National Patient Safety Goals

2021 Hospital
National Patient Safety Goals

The purpose of the National Patient Safety Goals is to improve patient safety. The goals focus on problems in health care safety and how to solve them.

- Established 2002 : Accredited organizations address specific areas of concern in regards to patient safety
- The first set of NPSGs was effective January 1, 2003

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Code BLUE

Code used at this institution in paging individuals to participate in resuscitation of a patient who has had a cardiopulmonary arrest / failure or who is experiencing a potential life-threatening event.

- A pediatric Code **Blue** will be announced for all children 17 years and under.

❖ **Who can a Code Blue be called for?**

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Code BLUE

How is Code* Blue *called?

- In Hospital--Dial x6363
  ◦ Tell the operator to page "Code **Blue**"
  ◦ Tell operator your location
    - *Example: "Charlie 1, Radiology, Room 3"*
- In Outpatient centers call 911 only

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Our Role: Code BLUE

- Call for help
- Assess vital signs
- Get emergency equipment to room
- Get chart to the room (unless electronic)
- Provide appropriate care while waiting for help to arrive
- Begin CPR if applicable - ABCs (CAB)
- Be prepared to provide history of events

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RRT: Rapid Response Team

A team of clinicians who bring critical care expertise to inpatient bedside.

- Available in-house at all times
- Assesses and assists in the management of the patient

❖ **When would a RRT be called?**

If an inpatient has a status change, call <u>RRT</u>

◦ Dial x6363
◦ MUST *BE SPECIFIC* if it is a pediatric patient

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RRT: Our Role

Assure notification of the Attending physician by the appropriate person (Resident physician for Teaching Service patients)

Provide the Team with:
- A brief history of the situation, patient background and his/her assessment of the patient
- Patient's current and recent medications, laboratory results and recent interventions

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Medical Emergency Team

A team who responds to a status change of:

Outpatient
Visitor
Staff
Student
Contractor

Status change could be feeling faint, low blood sugar, fall, chest pain, panic attack, etc…

Team consists of Emergency Department Staff, COACH nurse and Security

Clinical, Observation and Critical Help

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Medical Emergency: Our Role

- In Hospital-- Dial x6363
  ○ Tell the operator to page "Medical Emergency"
  ○ Tell operator your location
    • Example: "Charlie 1, Radiology, Room 2"
    • Specify if the patient is pediatric
- In Outpatient centers call 911 only

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Emergency Numbers

- Code Blue/RR Team/ Medical Emergency:
  - X6363
- Non-Medical Emergency:
  - X8222
- Code Help:
  - X5555
- Customer Service:
  - X8888

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