Digitalpenn i ambulansetjenesten

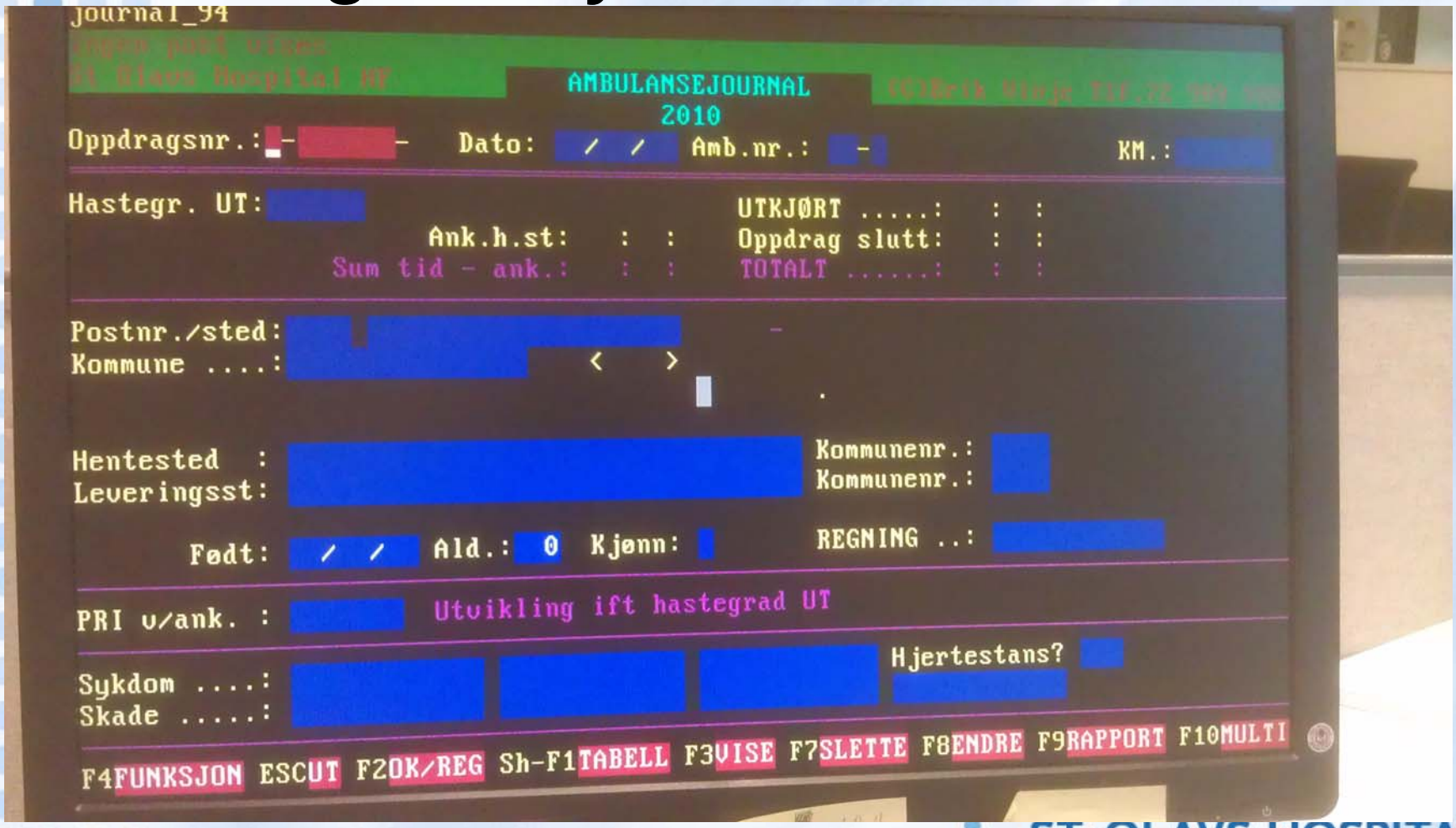
Akuttmedisinsk fagavdeling

Ambulanseavdelingen

St.Olavs Hospital HF

Gunnar Vangberg

Dagens system anno 1994



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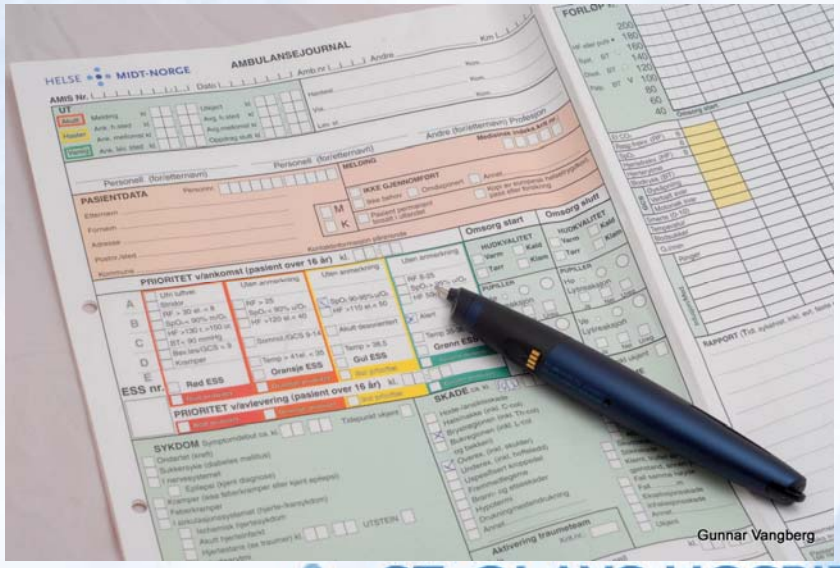
Digitalisering av ambulansejournal

- Ny ambulansejournal i ambulansetjenesten ved St. Olav innført
- Vi ønsker styrings-data, rapporter og strukturerte data til kvalitets-sikring og forskning



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Digitalpenn. Hvorfor?

- Rimelig i innkjøp
- Lite opplæring
- Lite support
- Robust
- Svært fleksibelt
- ”Man gjør som man har gjort før!”

Teknologi digitalpenn

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Dokumentasjon og rapporter

- Pdf kopi av journal til pasientens EPJ
- Standardiserte rapporter
  - Brystsmerter - % MONA regime
  - Slagbehandling – prosedyre
  - Div virksomhetstall
  - Oversikt over prosedyrer utført av hver enkelt ansatt
- Div forskning / undersøkelser

Pilot i Trondheim 2010

- Bil- og luftambulansen
- 100 pasienter
- Kun pdf-er

- Brukerne svært fornøyd
- Gjennomført ROS-analyse: ingen større utfordringer!
- Man har alltid back up i papir

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Studietur til ADAC i Tyskland

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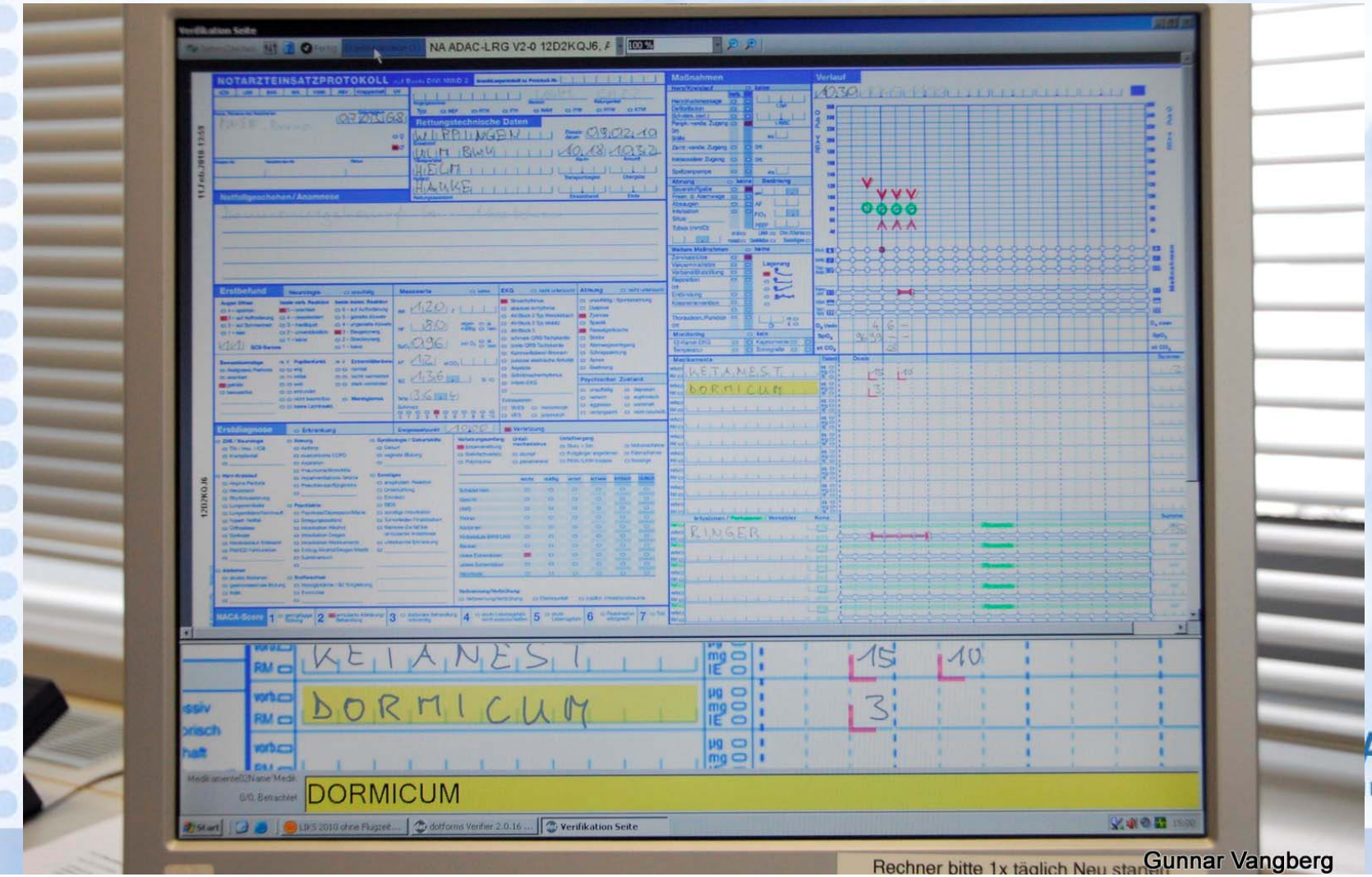
Tyske erfaringer

- Anaesthesist. 2009 Jan;58(1):24-9.
- **[Primary documentation quality for paper-assisted digital mission data documentation. Initial results from the air rescue service].**
- [Article in German]
- Helm M, Hauke J, Schlechtriemen T, Renner D, Lampl L.
- Abteilung für Anästhesiologie und Intensivmedizin-Sektion Notfallmedizin, Bundeswehrkrankenhaus Ulm, Oberer Eselsberg 40, 89070 Ulm, Deutschland. matthias.helm@extern.uni-ulm.de
- **Abstract**
- **BACKGROUND: With the assistance of digital pen and paper technology in the field of prehospital data reporting, it seems to be possible to fulfill the requirements of "documentation" as well as the requirements of "quality management". The aim of this study was to determine the "primary documentation quality" (PDQ) of a data reporting system based on digital pen and paper technology (so-called DINO) within a helicopter emergency medical service (HEMS) over a 6-month period.**
- **RESULTS: The PDQ is defined as the proportion of prehospital documented data, which is primarily recorded correctly by the data reporting system. For the national uniform core dataset (so-called MIND2) the PDQ was 96.7%, for "checkbox" and "numeric data fields" the PDQ was 99.8% and 93.6%, respectively and for "vital data" the PDQ was 96.7% [heart rate (HF), measurement of blood pressure] and 84.1% [peripheral oxygen saturation (S(p)O2), end tidal carbon dioxide concentration (etCO2), oxygen administration (O2)]. For "measurements" the PDQ was 96.9% (time stamps) and 86.9% (time frames), for "drugs" the PDQ was 43.6% (drug name) and 69.8% (drug dosage) and for"placement of infusion" 42% (infusion name) and 85.3% (infusion time), respectively. The average time for the "verification process" after mission completion was 1.5+/-0.4 min/mission.**
- **CONCLUSIONS: The "primary documentation quality" of prehospital mission data reporting with the assistance of a digital pen and paper based documentation system (DINO) has been shown to completely fulfill the requirements of rapid and safe data documentation in actual missions, even at this early stage of development.**
- **PMID: 19132331 [PubMed - indexed for MEDLINE]**

Godkjenning av journalen tar ca 1.5 minutt



Gunnar Vangberg

VEIEN VIDERE

- Database programmeres i Skottland november og desember
- Fullskala pilot på 5 stasjoner vinteren 2012
- Full implementering deretter

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Spørsmål?

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