

Quality Projects Reference

These projects are in addition to your local facility's programs and do not replace them. Reports will be provided for validation and comparison of internal data.

Chest Pain Project: Overall goal is to improve patient care by meeting quality metrics. Avel eCare Emergency follows national standards and benchmarks for time to Aspirin and time to EKG.

- Local facility receives quarterly report.
- Program data will only include patients that are on video with Avel eCare Emergency; due to this, reporting will not capture 100% of patients that present with chest pain symptoms. Program works best when the local facility calls before patient arrival or as patient is arriving in the ED.
- Data collection includes: Patient demographics, patient arrival time, Aspirin time, EKG time and whether EKG is done in the field (EMS), Fibrinolytic time, patient disposition, and transfer time if applicable
- Chest pain study calls often involve nursing documentation and Avel eCare Emergency physician review of EKG. The length of the call is determined by patient acuity and bedside staff, varying from 2 minutes to 2 hours.

Stroke Project: Overall goal is to improve patient care and was introduced as a request from a CAH due to not meeting door to CT read time of 45 minutes.

- Local facility receives quarterly report.
- Program data will only include patients that are on video with Avel eCare Emergency; due to this, reporting will not capture 100% of patients that present with stroke symptoms. Program works best when the local facility calls before patient arrival or as patient is arriving in the ED.
- Data collection includes: Patient demographics, time of symptom onset, time of CT order, time of CT result, fibrinolytic candidate, fibrinolytic administration time, transfer time if applicable.
- Avel eCare Emergency staff will review fibrinolytic exclusion criteria at the bedside teams request and fax up-on completion.

Intubation Project: Overall goal is to improve first pass success rate with video laryngoscope use, increase awareness, and provide airway management education. Please share the details of this project with your intubating clinicians.

- Local facility receives quarterly report.
- Program data will only include patients that are on video with Avel eCare Emergency; due to this, reporting will not capture 100% of patients that are intubated. Program works best when the local facility calls before patient arrival or as patient is arriving in the ED.
- When involved in an intubation on camera, Avel eCare Emergency collects the following data from the intubating clinician: primary indication for intubation, difficult airway markers, method, device, best glottic view, adverse events and patient disposition.
- Avel eCare Emergency will provide guidance to clinicians on use of intubation techniques and equipment during an acute event or upon request.