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TRI ANNUAL NEWSLETTER

EDITION 19

SOUTH EAST Chapter
Society of Critical Care Medicine

ICU UPDATE

SPRING 2017

FEBRUARY

Meeting In Review

TOPIC: Optimal Post-Arrest Care In 2016: Hypothermia And Beyond
by Hannah Dills, PharmD | (Click here for Presentation)

Dr. David Gaieski,
an emergency medicine physician at Jefferson Hospitals in Philadelphia, presented on the changing face of intra-arrest and post-arrest care at the Southeast Chapter of SCCM’s meeting on February 9th. The talk focused on three ways to improve outcomes following cardiac arrest: personalized resuscitation, optimizing post arrest care, and early ECMO initiation.

Dr. Gaieski discussed how personalized resuscitation aims to optimize hemodynamic response during cardiac arrest. He presented evidence for adjusting compression depth to maintain a systolic blood pressure of 100 mmHg and epinephrine administration to target coronary perfusion pressure greater than 20 mmHg. However, this technique has not been validated in humans. The focus for optimization of post-arrest care included targeted temperature management (TTM). Dr. Gaieski reviewed several studies that demonstrated improved neurologic outcomes with TTM; however, the optimal temperature remains controversial as Nielsen and colleagues found no difference in survival when a target temperature of 33°C was compared to 36°C. Lastly, the use of extracorporeal membrane oxygenation (ECMO) during cardiac arrest has been proposed as a bridge to restoration of natural cardiac output. Multiple case series have demonstrated improved survival and neurologic outcomes when patients were placed on ECMO early during cardiac arrest. As a result of these trials, early cannulation of patients in the emergency department, and even the field, is becoming increasingly common.

In conclusion, new advances in intra-arrest and post-arrest care have the potential to improve survival and neurologic outcomes following cardiac arrest.
On Tuesday, April 18, the Southeast Chapter of the Society of Critical Care Medicine hosted Dr. Paul DeSandre, Chief of Palliative and Supportive Care at Grady Memorial Hospital, Program Director of Fellowship in Hospice and Palliative Medicine and Assistant Professor of Emergency Medicine at Emory University, to discuss establishing goals for critical interventions with patients and families in the ICU. He elaborated about how the perceptions and expectations of family, patients, and caregivers do not always match and how to work to overcome this barrier including family-centered daily rounds and asking what is an acceptable outcome.

He also highlighted the VALUE approach: Value family statements, Acknowledge emotions, Listen, Understand the patient as a person, Elicit questions. He cautioned the audience to consider asking questions and listening first; then provide information and ask questions again.

A focus of the presentation was recognizing how our personal values can differ from the patient/family’s values and the importance of shared decision making. Dr. DeSandre also discussed resources available for communication skills development such as EPEC, Vitaltalk, and IPAL-ICU. The audience gained a thorough and well delivered review of how to communicate with patients and their family in stressful situations related to critical interventions.

Recognizing 2016 Presidential Citations
The Southeast Chapter is proud to announce that we have 19 members to receive Presidential Citations in 2016. Congratulations to the following persons:

Katie Luepke  
Jonathan Sevransky  
Kathryn Moore  
William Crowe  
Megan Van Berkel Patel  
Ashley DePriest  
Maria Zhorne  
Benjamin Brainard  
Joseph Swanson  
Stacey Campbell

Kathleen Chester  
Susan Hamblin  
Muhammad Jaffar  
Shauna Winters  
Brendan Riordan  
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Michael Sterling  
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The Southeast Chapter of Society of Critical Care Medicine started off 2017 with its first student-led live Twitter Chat.

The SCCM SE Region Twitter account (@SCCMSE) currently has about 240 followers and this continues to grow as social media continues to play an important role in improving interdisciplinary communications and patient outcomes.

Julianna Cebollero, a fourth year pharmacy student from the Mercer University College of Pharmacy, moderated the student-led chat.

Julianna selected “Antipsychotic prescribing patterns during and after critical illness: a prospective cohort study” about one month prior to the Twitter Chat and proposed various discussion questions to be used during the live discussion.

Tomicheck et al. evaluated antipsychotic drug use in the ICU and prescribing patterns at discharge. Up to 60-80% of mechanically ventilated patients in the ICU experience delirium; and antipsychotics are used despite unproven efficacy. Delirium in critical care populations can be difficult to assess. Tomicheck et al. concluded that antipsychotic drugs were used in almost half of all antipsychotic-naïve ICU patients and were prescribed at discharge to 24% of antipsychotic-treated patients.

Some treatments that are commonly used for ICU delirium include haloperidol, typical and atypical antipsychotics with treatment options being institution-specific.

Some strategies to help improve the use of antipsychotics in managing ICU delirium include interdisciplinary team efforts in the medication reconciliation process and appropriate hand off transitions from the ICU, since many of these patients should be weaning off or not need an antipsychotic.

The #SCCMSEChat encouraged participants to discuss the advantages of disadvantages with using antipsychotics in the management of ICU delirium.

Long-term antipsychotic use when not indicated may lead to increased outpatient medication expenses and increased mortality.

Adequate follow up in the outpatient setting, increased awareness for medication reconciliation, and transitions of care should be considered in the management of ICU delirium patients. Would this article change the way you manage antipsychotics for the treatment of ICU delirium?

Be on the lookout for the next #SCCMSEChat and join the conversation. You may be the next prizewinner when you participate.

Reference:

May is National Critical Care Awareness and Recognition Month (NCCARM)

May is National Critical Care Awareness and Recognition Month (NCCARM) and the Southeast Chapter of the Society of Critical Care Medicine would like to celebrate with our members. On Friday, May 19, 2017, SCCM encourages members to wear blue to promote NCCARM. We would love to help you plan, promote, and execute other activities to celebrate NCCARM. If you would like to be a liaison for your institution and serve on our planning committee to coordinate celebrations, please contact Ashley Mayer at amayer@gmh.edu.

If you are participating in any activities in your ICU (facilitated through our chapter or otherwise), we would love to share your celebrations on our Facebook/Twitter pages. You can post directly to our pages using #NCCARM or email stories or photos to amayer@gmh.edu.
The Southeast Chapter of SCCM held another successful FCCS course on May 3rd, prior to Southeastern Critical Care Summit, full of practical and hands-on teaching by great instructors and interactive learning. Join us for the FCCS course next year!

At 2017 Southeastern Critical Care Summit, Southeast Chapter represented with full force by promoting membership at the exhibit table, awarding SE chapter memberships to raffle winners, presenting posters and having 3 of the chapter officers as presenters! Ashley DePriest, Treasurer, presented on “Updates on feeding the critically ill”, Stacey Campbell, Secretary, spoke about “Sedation: Focus on Prevention of Post Intensive Care Syndrome”, and Marina Rabinovich, President, provided an update on “Vasopressors: What’s Hot, What’s Not, and What’s New”. Six of the SE Chapter of SCCM members presented posters at CC Summit (Anthony Hawkins, Rita Gayed, Nicholas Barker, Hina Patel, Katie Leupke, Lauren Cochran), and Nicholas Barker, Hina Patel and Katie Luepke were selected for “Best Poster” award! Congratulations SE Chapter of SCCM! Great Job!

2017 Annual Congress Social in Hawaii

The Southeast Chapter enjoyed getting together for a meeting and social this past year at the 2017 SCCM Annual Congress in Honolulu, Hawaii.

Southeast Chapter of SCCM at the 2017 Southeastern Critical Care Summit

The Southeast Chapter of SCCM is proud to offer the “Barbara A. McLean Contributions to Critical Care Nursing Award”. This award will be delivered to a critical care nurse who exemplifies the values of the SCCM: A model based on collaboration, contribution, evidenced based communications and collegiality. We’ve received several nominations and are in process of reaching out to nominees and completing the selection process. The award winner will be announced on the National Critical Care Recognition day, May 19, 2017.
Emergency Neurological Life Support (ENLS)

NOW AVAILABLE THROUGH THE SOUTHEAST CHAPTER OF THE SOCIETY OF CRITICAL CARE MEDICINE

The Southeast Chapter of the SCCM invites you to their first ENLS course conveniently scheduled on Wednesday, June 14, 2017.

The Emergency Neurological Life Support (ENLS) course is designed to help healthcare professionals improve patient care and outcomes during the critical first hours of a patient’s neurological emergency.

ENLS demonstrates a collaborative, multi-disciplinary approach and provides a consistent set of protocols, practical checklists, decision points, and suggested communication to use during patient management.

PRE- AND POST-TESTS:
Participants will complete online modules and pre- and post-tests independently via the SCCM Learning Management System prior to the day of the course (June 14).

CONTINUING EDUCATION:
CE/CME is provided to physicians, nurses, EMS, residents, fellows and pharmacists through SCCM for the online modules. This activity is designated for a maximum of 15 AMA PRA CME, ANCC, ACPE and CECBEMS credits upon completion.

PRICE:
Physicians - $200 (Early Registration)
For Emory/Grady Participants (RN/EMS/Fellows) - $75 (Early Registration)
Residents - $50 (Early Registration)
SE Chapter of SCCM Non-members Registration + SE Chapter Annual Membership: $125 (Best Value)

REFUND POLICY:
A $40 non-refundable processing fee is included in the course tuition. Written cancellations received 14 or more business days before the course will receive tuition reimbursement, less the $40 handling fee. Cancellations less than 14 days prior to course or failure to attend the course will result in forfeiture of the entire course tuition.

TEXT BOOK:
The text book can be purchased at www.sccm.org. The cost of the textbook is not included in the price of registration.

For questions or additional information, please contact Lizzette Hernaiz (lizzette.hernaiz@emory.edu) or Vivian Liao (liao_tv@mercer.edu). Registration is available online via the following link:
http://events.constantcontact.com/register/event?llr=uvyewwrab&oeidk=a07edxn18wnf636927a
SAVE THE DATES!

The Southeast Chapter of the Society of Critical Care Medicine proudly presents a bimonthly lecture and discussion on:

BUILDING AN INPATIENT CODE SEPSIS TEAM:
IT TAKES A VILLAGE
THURSDAY, JUNE 8, 2017, 5:30 – 7:30 P.M. EST

Carmen Polito, MD, MSc
Assistant Professor of Medicine
Director, Pulmonary Clinic, Grady Memorial Hospital.
Division of Pulmonary, Allergy, Critical Care, and Sleep Medicine, Emory University School of Medicine.

Sherika Kimbrough, RN MSN
Clinical Performance Improvement Specialist

Barbara McLean, MN, RN, CCRN, CCNS-BC, FCCM
Clinical Specialist in Critical Care

LIVE EVENT: Atlanta, GA
Remote Live Webcast: Birmingham, Chattanooga, Lexington, Little Rock, Memphis, Nashville & New Orleans

AUGUST BIMONTHLY LECTURE
AUGUST 9, 2017
SPEAKER, DR. RUTH KLEINPELLE, SCCM PRESIDENT

TWITTER JOURNAL CLUB
THURSDAY, MAY 18, 2017, NOON
TOPIC OF DISCUSSION: RESPIRATORY THERAPY

Thank you to our February /April Meeting Sponsors

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Want to become more involved? For members interested in joining a committee, please contact us at communications@sccmse.org, and let us know how we can get you involved with the Southeast Chapter of SCCM.