The International Journal of Blatantly Obvious Emergency Medicine

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Is it just me, or does much of emergency medicine research look like a rehash of the self-evident (only now with numbers attached)? Does the “easily observable” require statistical analysis to become fact? It seems that anyone with a drive to publish, a lot of spare time and a rear-view mirror can publish a paper about what looks clearly apparent to the naked eye.

Some recent conclusions from illustrious journals:
- homeless persons commonly come to the ED for food, shelter and safety
- bedside laboratory tests reduce time to laboratory results
- on-call specialists aren’t available as much
- sometimes people get injured by tasers

I’m as greedy as the next guy, and in this period of economic hardship, I need cash even more. So I’m starting up my own journal. I’ll publish whatever drivel you can muster, but I’m really looking for advertising dollars. I don’t have the time to write anything, but hey, most of this could write itself. So if you’re thinking of contributing or subscribing, I’m giving away the first month’s Table of Contents for free to inspire you.

GASTROINTESTINAL
- Nasogastric Tubes: No further evidence to suggest they work. A meta-analysis
- Does the 64 Slice CT Scanner Detect More Dinky Abnormalities Than Endoscopy?
- More Abdominal Pain and Vomiting Is Caused by Opiate Withdrawal Than Any Other Etiology

OPHTHALMOLOGY
- Fourth Generation Fluoroquinolone for Corneal Abrasions and Viral Pink Eye: A cost analysis sponsored by big pharma

PAIN AND SEDATION
- A Cohort Study: More patients on antidepressants are looking for pain control
- Oligoanalgesia by Government: Would viscous lidocaine help?
- Nebulized Midazolam for Pediatric Sedation Has

CARDIORESPIRATORY
- Comparison of Rapid Bedside d-dimer Versus Coin Flip
- Severe Hypotension and Multisystem Organ Failure in Septic Shock: Probably an indicator of poor outcome
- Clopidogrel Relieves Constipation and Removes Laundry Stains. (Authors report no conflicts of interest.)

EDUCATION
- Residents Would Get More Experience if They Worked Longer Hours and Stopped Sniveling: A randomized controlled trial
- A Clinical Decision Analysis for Prospective EM Residents: Ophthalmology or radiology

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Positive Effect on Hovering Parents

EMERGENCY DEPARTMENT OPERATIONS

• A Delphi Consensus on 300 Quality ED Indicators That Have No Effect on Outcome
• Customer Satisfaction: Patients prefer medications with higher milligrams
• Dispensing Aspirin, Amoxicillin and Haloperidol at Triage Increases LWBS Rate but Decreases Mortality

HEALTH SYSTEMS

• Nonwhite Inner-city Poor Have Sad and Violent Lives After ED Visit for Cocaine-related Chest Pain
• Chest CT for Pulmonary Embolism or 2 mg Oral Lorazepam? A cost–benefit analysis

CASE REPORTS

• Resolution of Chest Pain in a Homeless Alcoholic With a Turkey Sandwich Without Lettuce
• Blunt Trauma and a Surgeon Who Examines the Patient: A case report and review of the literature

SPECIAL INVESTIGATIONS

• Does the Number of Reported Allergies Correlate With Mental Illness?
• 25 Fun Tricks With Alcohol Gel When Bacteria Won’t Die

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