Clinician’s Capsules for *CJEM* 20(6)

**Rhythm and Rate Control of Atrial Fibrillation in the Emergency Department - A Large Community-Based Observational Study**
Cameron J. Gilbert, MD, MSc; Paul Angaran, MD; Zana Mariano, BA, MA, CCRP; Theresa Aves, HCBSc; Paul Dorian, MD, MSc
doi: 10.1017/cem.2017.421

**What is known about the topic?**
Although rarely life-threatening and not usually an emergent condition, atrial fibrillation (AF) places a large burden on our health-care system and emergency departments.

**What did this study ask?**
This study aimed to describe the practices of emergency physicians in the management of AF in a large urban Canadian city.

**What did this study find?**
There is a wide range of practice amongst emergency physicians treating patients presenting to the ED with a primary diagnosis of atrial fibrillation.

**Why does this study matter to clinicians?**
More data are needed to better understand the optimal management strategy in this patient population and setting.

**Evaluation of a Primary Care Paramedic STEMI Bypass Guideline**
Jonathan Kwong, MSc; Garry Ross, ACP; Linda Turner, PhD; Chris Olynyk, ACP; Sheldon Cheskes, MD; Adam Thurston, RN, ACP; P. Richard Verbeek, MD
doi: 10.1017/cem.2017.415

**What is known about the topic?**
There is limited evidence to support STEMI bypass by primary care paramedics for percutaneous coronary intervention (PCI).

**What did this study ask?**
Can primary care paramedics safely implement a bypass guideline for stable STEMI patients?

**What did this study find?**
Primary Care Paramedics were able to reasonably identify stable STEMI patients and provide safe transport to a PCI centre.

**Why does this study matter to clinicians?**
Including primary care paramedics in a STEMI bypass program could expand the availability of PCI for STEMI patients.

**Correlation of age and rurality with low-urgency use of Emergency Medical Services (LUEMS): A geographic analysis**
Mikiko Terashima, PhD; Alix J. E. Carter, MD, MPH
doi: 10.1017/cem.2017.364

**What is known about the topic?**
Addressing the needs of the older population in rural areas may substantially reduce their low-urgency use of emergency medical services.

**What did this study ask?**
What was the rates of low urgency emergency medical service use by age and rurality in Nova Scotia in 2011–2012?

**What did this study find?**
The LEUMS rates were high for all ages, but the absolute number by the older population is significant in rural areas.

**Why does this study matter to clinicians?**
Increase of services catering to the older population in rural areas likely lead to cost-effectiveness in the health care system.

**A web-based module and online video for pain management education for caregivers of children with fractures: a randomized controlled trial**
Stevi Golden-Plotnik, MD; Samina Ali, MDCM; Amy L. Drendel, DO, MS; Tammy Wong, BSc; Frank Ferlisi, MD; Sydney Todorovich, BMSc, MPH; Kyle Canton, HBSc; Michael Miller, PhD; Julia Younan, BMSc; Sharlene Elsie, BSc; Naveen Poonai, MD, MSc
doi: 10.1017/cem.2017.414

**What is known about the topic?**
Most children experience some level of functional compromise due to pain following a fracture.

**What did this study ask?**
Was an educational video and interactive web-based module associated with greater caregiver knowledge surrounding pain management for children with fractures?

**What did this study find?**
Both an educational video and an interactive web-based module was associated with significantly greater knowledge acquisition compared to verbal instructions.
Why does this study matter to clinicians?
Local implementation of similar digital technologies is feasible and could improve caregiver knowledge for children with fractures.

Real-Time Video Telemedicine Applications in the Emergency Department, a scoping review of the literature
Danielle K. Kelton, MD; Adam Szulewski, MD; Daniel Howes, MD
doi:10.1017/cem.2017.382

What is known about the topic?
Telemedicine applications have been used for many years in attempts to close geographical and resource-related gaps in health care services.

What did this study ask?
What is the status of research investigating the utilization of telemedicine technology to improve patient care in the Emergency Department?

What did this study find?
Evidence available regarding the use of telemedicine systems is currently limited to qualitative outcomes such as patient or physician satisfaction.

Why does this study matter to clinicians?
This technology is being used worldwide to treat injuries ranging from minor musculoskeletal injuries to acute life-threatening cardiovascular disease processes.

Competency in Acute Resuscitation Through Successive Simulation (CARTSS): a mentor based, near peer learning initiative
John R. O’Leary, BScH, MSc; Natasha L. Goumeniouk, BSc; Alexander S. Cormier; Daniel J. Potter, BSc; Filip Gilic, MD; Erin E. Brennan, MD, MMEd
doi: 10.1017/cem.2018.28

What is known about the topic?
Medical trainees benefit from shorter and more frequent CPR training to perform chest compressions as per recommended guidelines.

What did this study ask?
How can we utilize high-frequency and high-fidelity simulation to expose junior medical learners to resuscitation training earlier in their career?

What did this study find?
Mentorship based near-peer instruction was key to being able to provide frequent effective CPR training sessions to a large number of participants.

Why does this study matter to clinicians?
As medical training transitions to competency-based evaluation, early exposure and resuscitation training will benefit learners at all levels.