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There are probably two adverse events related to prolonged paralysis following discontinuation of NMBAs. We define the first, "prolonged recovery from NMBAs," as an increase (after cessation of ...

~~Clinical Practice Guidelines for Sustained Neuromuscular Blockade in the Adult Critically Ill Patient~~

The impact of the COVID-19 crisis is far-reaching and is an important eye-opener for healthcare providers to understand the surging need for resilient infrastructure, especially for oxygen ...

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~~Kauvery Hospital Chennai declares complete self-reliance for all oxygen requirements~~

pictures and stories A Border Collie who lost an eye when he was a puppy now provides inspiration to the sick and terminally ill. Jack, who lost an eye in an accident when he was just five weeks ...

~~Dog with one eye now helps the sick and terminally ill~~

A patient in the intensive care unit of a hospital in India was bitten by a rat near his eye, his family claimed ... "He is already in a critical condition. Who will be responsible if something ...

~~Critically Ill Patient Bitten By Rat While At Hospital; Investigation Underway~~

physiotherapy team when used on critically ill COVID-19 patients. The study, which appeared in the pre-print server medRxiv*, found that the incorporation of these maneuvers into the care of ...

~~Pronation maneuvers for critically ill COVID-19 patients—multidisciplinary management reduce complications~~

A former dietician by training, Nora had been keeping a close eye on Ben ' s nutritional status ... whose wavy corridors were all openly visible from... 3 Care-Captaining: Climbing the Rungs of the US ...

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~~"Save My Kid": How Families of Critically Ill Children Cope, Hope, and Negotiate an Unequal Healthcare System~~

Prevention is better than treatment in cases of joint ill and navel ill. If calving areas are low, wet, muddy or manure is accumulating, remedy this or move calving areas.

~~Joint and Navel Ill Common in Calves~~

The findings corroborate the earlier REMAP-CAP reports of the efficacy of the two IL 6ra drugs relative to standard of care for critically ill patients, and similarly, those of the RECOVERY trial ...

~~Tocilizumab and sarilumab shown to be effective in critical COVID-19~~

Ian Kightley, 53, from Denbighshire was diagnosed with an aggressive form of Multiple Myeloma, a type of bone marrow cancer, in September 2015. Ian has been receiving chemotherapy for more than ...

~~Terminally ill man's desperate need for cataract surgery to see family for one last time~~

The city plans to add more hospital beds and designate the Thu Duc Hospital for COVID-19 Treatment in Thu Duc as a medical facility providing intensive care for patients in critical conditions ...

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~~HCM City develops response plan to care for up to 500 critically ill COVID-19 patients~~

Operating out of a tucked away business park in South Yorkshire the specialist doctors and nurses team, who travel with their patients by road ambulances, helicopters and planes, has carried out ...

~~Meet the man behind a life-saving transport service for critically ill infants and children across Yorkshire~~

DOWNER GROVE, Ill ... 3rd Eye's next-generation digital strategy, Connected Collections™, provides fleet owners with unprecedented access to asset-based data that enables faster critical ...

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Chennai (Tamil Nadu) [India], July 12 (ANI/NewsVair): The impact of the COVID-19 crisis is far-reaching and is an important eye ... critical departments with a surplus for emergency, day-care ...

~~Kauvery Hospital Chennai declares complete self-reliance for all oxygen requirements~~

New Delhi [India], July 12 (ANI/NewsVair): The impact of the COVID-19 crisis is far-reaching and is an important eye ... by all critical departments with a surplus for emergency, day-care patients ...

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Provides detailed coverage of a number of specialty areas within critical care nursing including intensive care, emergency nursing, cardiac nursing, neuroscience nursing and acute care. It will encourage students to be reflective practitioners, ethical decision makers and providers of evidence based care. Australian authors.

This book provides essential insights into how the approach to nursing care in ICU patients has markedly changed over recent years. It shows how the focus has progressively moved away from the technical approach that characterized early ICUs to a wider personalization of patient care that also highlights general problems such as basic hygiene and general comfort. It also demonstrates that, at the same time, the nurses' role has become more professionalized, with increasing competences in assessing and managing patients' problems and measuring related outcomes. It is structured in four units: Unit 1 presents the essential elements of accurate vital-function and basic-needs assessments for ICU patients, using both instrumental monitoring and specially validated assessment tools. Unit 2 addresses basic care in ICU patients, particularly hygiene and mobilization, reflecting recent developments in nursing that focus on the importance of these activities. Unit 3 highlights the main nursing outcomes in ICU patients, particularly focusing on risk prevention and complication management. Lastly, Unit 4 discusses advances in ICU nursing, from clinical, organizational and research perspectives.

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This manual is aimed at all healthcare practitioners, from novice to expert, who care for the critically ill patient, recognising that different disciplines contribute to the provision of effective care and that essential knowledge and skills are shared by all practitioners. It provides evidence-based guidelines on core critical care procedures and includes a comprehensive competency framework and specific competencies to enable practitioners to assess their abilities and expertise. Each chapter provides a comprehensive overview, beginning with basic principles and progressing to more complex ideas, to support practitioners to develop their knowledge, skills and competencies in critical care.

Over the past two decades, the healthcare community increasingly recognized the importance and the impact of medical errors on patient safety and clinical outcomes. Medical and surgical errors continue to contribute to unnecessary and potentially preventable morbidity and/or mortality, affecting both ambulatory and hospital settings. The spectrum of contributing variables-ranging from minor errors that subsequently escalate to poor communication to lapses in appropriate protocols and processes (just to name a few)-is extensive, and solutions are only recently being described. As such, there is a growing body of research and experiences that can help provide an organized framework-based upon the best practices and evidence-based medical principles-for hospitals and clinics to foster patient safety culture and to develop institutional patient safety champions. Based upon the tremendous interest

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in the first volume of our Vignettes in Patient Safety series, this second volume follows a similar vignette-based model. Each chapter outlines a realistic case scenario designed to closely approximate experiences and clinical patterns that medical and surgical practitioners can easily relate to. Vignette presentations are then followed by an evidence-based overview of pertinent patient safety literature, relevant clinical evidence, and the formulation of preventive strategies and potential solutions that may be applicable to each corresponding scenario. Throughout the Vignettes in Patient Safety cycle, emphasis is placed on the identification and remediation of team-based and organizational factors associated with patient safety events. The second volume of the Vignettes in Patient Safety begins with an overview of recent high-impact studies in the area of patient safety. Subsequent chapters discuss a broad range of topics, including retained surgical items, wrong site procedures, disruptive healthcare workers, interhospital transfers, risks of emergency department overcrowding, dangers of inadequate handoff communication, and the association between provider fatigue and medical errors. By outlining some of the current best practices, structured experiences, and evidence-based recommendations, the authors and editors hope to provide our readers with new and significant insights into making healthcare safer for patients around the world.

The ability to see deeply affects how human beings perceive and interpret the world around them. For most people, eyesight is part of everyday communication, social activities, educational and professional pursuits, the care of others, and the

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maintenance of personal health, independence, and mobility. Functioning eyes and vision system can reduce an adult's risk of chronic health conditions, death, falls and injuries, social isolation, depression, and other psychological problems. In children, properly maintained eye and vision health contributes to a child's social development, academic achievement, and better health across the lifespan. The public generally recognizes its reliance on sight and fears its loss, but emphasis on eye and vision health, in general, has not been integrated into daily life to the same extent as other health promotion activities, such as teeth brushing; hand washing; physical and mental exercise; and various injury prevention behaviors. A larger population health approach is needed to engage a wide range of stakeholders in coordinated efforts that can sustain the scope of behavior change. The shaping of socioeconomic environments can eventually lead to new social norms that promote eye and vision health. Making Eye Health a Population Health Imperative: Vision for Tomorrow proposes a new population-centered framework to guide action and coordination among various, and sometimes competing, stakeholders in pursuit of improved eye and vision health and health equity in the United States. Building on the momentum of previous public health efforts, this report also introduces a model for action that highlights different levels of prevention activities across a range of stakeholders and provides specific examples of how population health strategies can be translated into cohesive areas for action at federal, state, and local levels.

Cicatrising conjunctivitis is one of the most challenging causes of ocular surface

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disease today and without appropriate intervention, corneal blindness or loss of sight from supervening infection is common. Because many of these diseases are rare, there is often limited management experience available and the resources for research into treatment and pathogenesis are scarce. This book summarizes present treatment strategies and the clinical and laboratory studies validating these approaches. Topics discussed in this ambitious volume include an in-depth look at non-progressive causes including trachoma, Stevens-Johnson syndrome and ligneous conjunctivitis. It also examines chronic progressive conjunctival cicatrization, the diseases which cause it, their clinical and laboratory evaluation, immunopathogenesis, sequelae and management. Armed with this knowledge, successful intervention can be planned for the prevention and treatment of a group of diseases previously associated with poor prognoses. Ophthalmologists and dermatologists seeking practical advice about the management of these diseases will benefit most from this book.

With each edition, ACCCN's Critical Care Nursing has built on its highly respected reputation. Its contributors aim to encourage and challenge practising critical care nurses and students to develop world-class critical care nursing skills in order to ensure delivery of the highest quality care. Endorsed by the Australian College of Critical Care Nurses (ACCCN), this 3rd edition presents the expertise of foremost critical care leaders and features the most recent evidence-based research and up-to-date advances in clinical practice, technology, procedures and standards. Expanded to

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reflect the universal core elements of critical care nursing practice authors, Aitken, Marshall and Chaboyer, have retained the specific information that captures the unique elements of contemporary critical care nursing in Australia, New Zealand and other similar practice environments. Structured in three sections, ACCCN's Critical Care Nursing, 3rd Edition addresses all aspects of critical care nursing, including patient care and organisational issues, while highlighting some of the unique and complex aspects of specialty critical care nursing practice, such as paediatric considerations, trauma management and organ donation. Presented in three sections:

- Scope of Critical Care
- Principles and Practice of Critical Care
- Speciality Practice

Focus on concepts that underpin practice - essential physical, psychological, social and cultural care New case studies elaborate on relevant care topics Research vignettes explore a range of topics Practice tips highlight areas of care particularly relevant to daily clinical practice Learning activities support knowledge, reflective learning and understanding Additional case studies with answers available on evolve NEW chapter on Postanaesthesia recovery Revised coverage of metabolic and nutritional considerations for the critically ill patient Aligned with the NEW ACCCN Standards for Practice

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A revised new edition of this comprehensive critical care nursing text, developed with the Australian College of Critical Care Nurses (ACCCN). This second edition of

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ACCCN's Critical Care Nursing has been fully revised and updated for critical care nurses and students in Australia and New Zealand. As well as featuring the most recent critical care research data, current clinical practice, policies, procedures and guidelines specific to Australia and New Zealand, this new edition offers new and expanded chapters and case studies. The ultimate guide for critical care nurses and nursing students alike, ACCCN's Critical Care Nursing 2e has been developed in conjunction with the Australian College of Critical Care Nurses (ACCCN). As with the first edition, the text in ACCCN's Critical Care Nursing 2e reflects the expertise of ACCCN's highly-qualified team of local and international critical care nursing academics and clinicians. This authoritative nursing resource takes a patient-centred approach, encouraging practising critical care nurses and students to develop effective, high-quality critical care nursing practice. ACCCN's Critical Care Nursing 2e outlines the scope of critical care nursing, before detailing the core components and specialty aspects of critical care nursing, such as intensive care, emergency nursing, cardiac nursing, neuroscience nursing and acute care. Specific clinical conditions such as emergency presentations, trauma, resuscitation, and organ donation are featured to explore some of the more complex or unique aspects of specialty critical care nursing practice. expanded chapters for cardiovascular, respiratory and neurological content new chapters on Quality and Safety; Recovery and Rehabilitation; Psychological care; and Obstetric emergencies new case studies elaborate on relevant care issues critiques of recent research publications explore related topics practice tips highlight areas of care particularly relevant to daily

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clinical practice learning activities support knowledge, reflective learning and understanding

Endorsed by the Australian College of Critical Care Nurses (ACCCN) ACCCN is the peak professional organisation representing critical care nurses in Australia Written by leading critical care nursing clinicians, Leanne Aitken, Andrea Marshall and Wendy Chaboyer, the 4th edition of Critical Care Nursing continues to encourage and challenge critical care nurses and students to develop world-class practice and ensure the delivery of the highest quality care. The text addresses all aspects of critical care nursing and is divided into three sections: scope of practice, core components and specialty practice, providing the most recent research, data, procedures and guidelines from expert local and international critical care nursing academics and clinicians. Alongside its strong focus on critical care nursing practice within Australia and New Zealand, the 4th edition brings a stronger emphasis on international practice and expertise to ensure students and clinicians have access to the most contemporary practice insights from around the world. Increased emphasis on practice tips to help nurses care for patients within critical care Updated case studies, research vignettes and learning activities to support further learning Highlights the role of the critical care nurse within a multidisciplinary environment and how they work together Increased global considerations relevant to international context of critical care nursing alongside its key focus within the ANZ context Aligned to update NMBA RN Standards for Practice and NSQHS Standards

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