	Volume 102			
	ACCOLLANDSHUSPITAL			
	GROUND RULES May 2018			
	GROUND RULES			
6 1 6 1 6 6	 A. Laboratory Conduct/Behavior NO eating or drinking is allowed in the laboratory. NO use of incident language is allowed while communicating with other colleagues, customers and/or users of the laboratory. Smoking is prohibited in the laboratory. Do not use the equipment for any purpose other than specified; failure to comply will result in disciplinary actions or termination. 			
	•Any equipment malfunction must be reported to the laboratory manager immediately.			
	•Needles /sharps are never to be reused under any circumstance and should be disposed of in			
Inside this Issue	the sharps container.			
Ground Rules	•Specimen collected from patients should be disposed off into biohazard trash containers.			
	•Adherence to the dress code is expected. You must be in uniform provided by the hospital			
Hospital Statistics	while on duty. •All staff must be attired with their lab coats, cover mouth whole shoes and gloves when			
	operating on the work bench.			
A	•All cell phones and/ or electronic devices must be tuned off and placed in lockers and not near			
	the work station.			
Doctors Meeting	•All telephones in the laboratory are to be used for laboratory purposes only.			
	No shutting or loud speaking across the department.			
	•No laboratory test should be performed on self/relatives/friends at any time or discounts of more than the approved 10% for immediate relatives (Husband/wife/children) without permission by Medical Director			
Nurses Meeting	 Any reagent bottle/container broken or reagent spillages should be reported immediately to the Laboratory Manager. Reagents/ supplies/ equipment should not be disposed off without the approval of the Laboratory Manager and a representative from the Audit department. 			
	B. Confidentiality			
<u>Health Corner</u>	•All staff/attachment students/authorized personnel will be required to sign a confidentialit agreement to protect and preserve access to patient information.			
Pulmonary Embolism	Be confidential with people's information, and respect people's privacy			
0.000 00	C. Inventory and Supplies			
	•First in, first out rule is employed when performing stock checks weekly in the various			
	departments.			
Announcements	• Supplies and equipment must not be taken out of the lab unless authorized by the Managing Director.			
A 100 - 100 - 2	D. Clean-up			
	Housekeeping must be performed after every shift			
0.0000000000000000000000000000000000000	Waste containers attached to equipment must be emptied daily			
	•Each department must be organized neatly for a continuous work flow. E. General			
100	Listen to all colleagues respectfully.			
0000	Seek understanding before responding.			
	Speak concisely to make the best use of limited time.			
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If there is disagreement, disagree respectfully and openly, not in private.

Continue page 2

Share all relevant information.

NEWS IN BRIEF

SOME STATISTICS FOR APRIL, 2018

DOCTORS MEETING:-

Was held on 25 April, 2018 at 17:00 Hrs......Chairperson—Dr. N.Gobin Topic: Pulmonary Embolism by Dr. Tembe

Emergency Room

Patients Seen - 2344

Admissions—101

Maternity

Total Deliveries—40

Males-17

Females-23

Caesarean Sections-15

Neonatal Death— 0

Twins-1

Premature—8

Breech-0

Still Births-0

Male ward

Admission-77

Deaths-0

Female ward

Admission - 155

Deaths-0

<u>ICU</u>

Admissions-31

CICU

Stent- 17

Angiogram-17

Deaths-1

Radiology

X-ray- 1220

CT-187

Ultrasound—2420

Theatre

Surgeries—123

Ophthalmology — 55

Pharmacy

Prescriptions - 4277

Laboratory

Patients attended-2873

Pathology Lab

Cytology — 114

Histopathology— 114

NURSES MEETING:-

ALL NURSES

Was held on 10th April, 2018 at 15:00 Hrs.

Topic: Discussion of Plans for Nurses Day.

Ground rules continue..

- Stay focused. Discuss a topic enough for everyone to be clear about it.
- Ask questions when you don't understand.
- Listen and do not interrupt while one person speaks at a time.
- Do not blame, accuse, or make generalizations but as far as possible be specific and
- tactful when putting over your thoughts.
- Be on time reporting for duty and returning from lunch breaks.

Pharmacy and Dispensary department.

- Staff is to be attired in complete uniform Monday to Friday
- Staff is required to wear neatly pressed and clean lab coats while on duty.
- Casual wear on Saturday, Sunday and Holiday must be modest.
- Absolutely no use of cellphones during working hours
- Needs to be at least five minutes to work before shift starts.
- Chewing of gum prohibited.
- Staff is entitled to ten percent discount when buying items without a prescription and fifteen percent with prescription.
- Expired checks are done monthly and monitored daily.

Every staff is required to promote high level of professionalism and excellent customer service.

- No sleeping while on duty.
- Staff must be respectful and polite to colleagues, management and patients alike.
- Every problem has a solution.
- Requests for day-off or time-off must be given in advance
- Mistakes are inevitable but should try to be avoided at all times.
- Ask....do not steal.
- Maintain an open relationship at all times.
- Stop using gossip as a bonding tool.
- Follow all protocols regarding the sale of items for both departments.

Woodlands Radiology Department

Trust

Deliver consistent, high quality results Act with integrity and Professionalism

Follow policies and procedures

Respect

Treat everyone with dignity and compassion

Embrace diversity and all that it brings to Woodlands

Listen, value input and seek understanding

Accountability

Consider impact to others

Honor commitments

Respect for hospital property

Be confidential

PULMONARY EMBOLISM

When a blood clot gets caught in one of the arteries that go from the heart to the lungs, it's called a pulmonary embolism (PE). The clot blocks the normal flow of blood.

This blockage can cause serious problems, like damage to your lungs and low oxygen levels in your blood. The lack of oxygen can harm other organs in your body, too. If the clot is big or the artery is clogged by many smaller clots, a pulmonary embolism can be fatal.

Pulmonary embolisms usually travel to the lungs from a deep vein in the legs. Doctors call this "deep vein thrombosis" (DVT). These clots develop when the blood can't flow freely through the legs because your body is still for a long time, say during a long flight or drive. It might also happen if you're on bed rest after surgery or illness.

What Else Could Raise My Chances of PE?

The risk factors are the same as those for DVT. Doctors refer to these as "Virchow's triad." They include:

Being immobile for a prolonged period of time or having alterations in normal blood flow. This often happens if you've been hospitalized or on bed rest for a long period of time. It could also happen during a long flight or vehicle ride.

Increased clotting potential of your blood. Doctors call this "hypercoagulability." This could be caused by medications, like birth control pills. Smoking, cancer, recent surgery, or pregnancy can also put you at risk.

Damage to a blood vessel wall. Trauma to your lower leg can lead to this.

In rare cases, an artery in the lung can be blocked by something other than a clot, like an air bubble or part of a tumor. If you break a big bone, sometimes fat from the bone marrow can come through the blood and cause blockage.

Symptoms

What you experience will likely depend on the size of the clot and how much of your lung it affects. If you have lung or heart disease, that can play a role, too.

Symptoms of PE tend to come on suddenly. Seek medical attention if you have any of the following:

- Shortness of breath
- Chest pain
- Cough (it may be bloody, and there might be blood in the gunk you cough up)
- Pain in your back
- Much more sweating than usual
- A lightheaded feeling, or passing out

Blue lips or nails

Warning Signs of Deep Vein Thrombosis

See your doctor right away if you have any of the symptoms of DVT. If it's found early, doctors can stop it from becoming a pulmonary embolism. Signs of DVT include:

- Swelling of a leg or arm
- Leg pain or tenderness when you're standing or walking
- A swollen leg or arm that feels warmer than normal
- Red or discolored skin in the affected arm or leg
- Veins in your arm or leg that are larger than normal Other tests your doctor might order include: chest X-ray/ultrasound

Spo2

Blood gases

Blood test for D Dimer (This is a small protein fragment that's present in the blood after a clot is broken down by the body).

- Computed tomographic angiography (CTPA).
- Ventilation/perfusion (V/Q) scans.
- Pulmonary angiography.
- MRI.
- Echocardiogram .

Treatment

A pulmonary embolism (PE) is a blood clot in the lung. It's serious and can be life-threatening. But the good news is that if it's caught early, doctors can treat it.

Blood Thinners

Also called "anticoagulants," these are the most common treatment for a blood clot in the lung. They serve two key roles: First, they keep the clot from getting any bigger. Second, they keep new clots from forming.

They don't dissolve blood clots. Your body normally does that on its own over time.

The most commonly prescribed blood thinners are warfarin (Coumadin, Jantoven) and heparin. Warfarin, in a pill, can treat and prevent clots. Heparin can lower the chances of another clot forming. You get it through a shot or an IV. Treatment can begin while you're in the hospital. How long you'll stay and be treated depends on your condition.\

Low-molecular-weight heparins are also becoming widely used. These can be self-injected at home. They include: Dalteparin (Fragmin)

Enoxaparin (Lovenox)

Tinzaparin (Innohep)

Internal bleeding is the main side effect of blood thinners. It can happen if the medicine thins your blood too much. Your doctor will give you blood tests to keep an eye on that. In life-threatening situations, doctors might use what are called thrombolytic drugs. These quickly break up clots that cause severe symptoms. But they can lead to sudden bleeding and are only used as a last resort.

Catheter This is another emergency treatment your doctor might use. He'll insert a thin, flexible tube into a vein in your thigh or arm. He'll continue on to your lung, where he'll remove the clot or use medicine to dissolve it.

Other Treatments

If you can't take blood thinners, your doctor might use these options to treat your PE:

- Inferior vena cava filter.
- Compression stockings
- Surgery. Rarely, an operation may be needed to remove a clot from the lung.
- Blood Thinners

Doctors call these "anticoagulants." They keep your blood from forming clots. Your doctor may prescribe them to you while you're in the hospital for surgery. He might also suggest you keep taking them for some time after you go home.

Your doctor might also recommend blood thinners if you've been hospitalized after a stroke or heart attack, or have complications from cancer.

Compression Stockings These are long socks that squeeze your legs. The extra pressure helps blood move through your veins and leg muscles. Your doctor may recommend you wear them for a while after surgery. *P.T.O*

Exercise

Stretching During Trips

- 1. Pull your leg up toward your chest with one hand.
- 2. Hold the bottom of that leg with the other hand.
- 3. Keep this pose for 15 seconds, then try it with the other leg.
- 4. Do this up to 10 times.

If you're driving a long distance, stop every hour and stretch your legs.

Also, be sure to drink extra fluids to help you stay hydrated.

Lifestyle Changes

Along with exercise, there are a number of steps you can take going forward. Here are some important ones:

Maintain a healthy weight.

If you plan to take hormones, like birth control or replacement therapy, talk to your doctor about your risk for blood clots. If you have other health issues, like diabetes or heart failure, take your meds, watch what you eat, and talk to your doctor about any changes.

If you smoke, quit.

Surgery

Surgical management of acute pulmonary embolism (pulmonary thrombectomy) is uncommon and has largely been abandoned because of poor long-term outcomes. However, recently, it has gone through a resurgence with the revision of the surgical technique and is thought to benefit certain people. Chronic pulmonary embolism leading to pulmonary

hypertension (known as chronic thromboembolic hypertension) is treated with a surgical procedure known as a pulmonary thromboendarterectomy.

Prognosis

Less than 5 to 10% of symptomatic PEs are fatal within the first hour of symptoms. [25][75]

There are several markers used for risk stratification and these are also independent predictors of adverse outcome. These include hypotension, cardiogenic shock, syncope, evidence of right heart dysfunction, and elevated cardiac enzymes

Prognosis depends on the amount of lung that is affected and on the co-existence of other medical conditions; chronic embolisation to the lung can lead to pulmonary hypertension.

Reference from webMD

Ground rules continue

Nursing Service

- 1. No use of cell phones while on duty, there should be an exception when cell phones are used during lunch hours.
- 2. No use of foreign language to communicate with colleagues, however if there's need to translate from a patient that speaks a foreign language, same will be permitted.
- 3. No discussion of personal affairs in the presence of patients.
- 4. All patients information must be kept confidential, no patient information should be shared with other departments, unless they are directly involved in that patient's care.
- 5. No chewing while on duty.
- 6. No lingering in any department that u are not assigned to.
- 7. All nurses are to be addressed as Nurse followed by their surname.
- 8. Hospital uniform (current) must be worn only on duty; all nurses must change into their civilian clothing when leaving the compound.
- 9. When answering the telephone, all nurses must indicate the area the call was made to and identify themselves to the caller.

Management and Staff wish to congratulate the following persons on their birth anniversary for May, 2018

Name of Staff	Birthday
Orean Roopchand	1 st
Alex Antony	5 th
Sheeb <mark>a Biju</mark>	7 th
Mari <mark>amm</mark> a John	11 th
Coretta Norton	11 th
Sarala Cheruvalath	14 th
Anoop Bhaskar	17 th
Leiselle Paul	17 th
Oneisa Robertson	17 th
Cindy Persaud	20 th
Roshna Kallupurackal	20 th
Princy Thomas	25 th
Thomas Chacko	30 th
Libin Thomas	30 th
Merlin Thomas	30 th
Roshnie Singh-Persaud	31 st

TAKING A BREAK FROM WOODLANDS

Staff	Leave	
Videsha Persaud	1 st -14 th May	
Amanda Jarvis	6 th – 12 th May	
Tamika Sandy	13 th – 19 th May	



Attendant:1 position Housekeeper:3 positions

Housekeeper Manager: 1 position Multipurpose Technician: 1 Position Switchboard Operator: 1 Position Customer Service Manager: 1 Position

ALL APPLICANTS WILL BE EXPECTED TO WORK ALL SHIFTS

We can now be perused on our Web Site www.woodlandshospital.com