MORBIDITY & MORTALITY
CASE PRESENTATIONS

18TH ANNUAL
Scientific Assembly
February 8-10, 2012

Hotel Del Coronado
San Diego

Abstract Submission Form and Instructions
Submission Deadline: NOVEMBER 4, 2011
Call for Morbidity and Mortality Case Presentations

Graduate physicians (may include EM residents with the resident doing the case presentation and the Faculty presenting the discussion) are invited to present their best Morbidity and Mortality cases at the 18th Annual AAEM Scientific Assembly in San Diego on Thursday afternoon, February 9, 2012. It is clear that proactive discussion of clinical cases which typify cognitive errors (biases, failed heuristics and failures in perception) lead to improved patient safety and a reduction in diagnostic error. AAEM is excited to provide this opportunity to share such cases with your EM colleagues. In order to provide a consistent method of case presentation and discussion, the following template design should be used to construct your presentation. We also refer you to two papers that will aid in developing your discussion points: The Importance of Cognitive Errors in Diagnosis and Strategies to Minimize Them. Croskerry P. Acad. Med. 2003;78:775–780 and Profiles in Patient Safety: A “Perfect Storm” in the Emergency Department. Campbell SG, Croskerry P, Bond WF. Academic Emergency Medicine 2007; 14:743–749.

2012 AAEM Morbidity and Mortality Checklist

Participant: Faculty (and senior resident)

20 minute presentation/5 minutes for questions

1. Brief presentation of the clinical scenario including: date, patient volume, objective description of the patient and the family
2. Communication issues: written, verbal, with patient, family, providers or consultants
3. Knowledge base issues
4. Affective bias (factors that made this patient difficult, or conversely, overly rewarding, to work with)
5. Systems issues, to include ergonomic and information accessibility
   a. ED
   b. hospital
   c. consultant
6. Teamwork issues: failures, could improvement here have prevented the situation?
7. Equipment issues
8. Cognitive issues and bias (see Croskerry papers)
9. Procedural complications
10. Which issue was the single greatest contributor to the error in this case?
11. What could the SYSTEM do better in order to preclude a similar situation in the past?
12. Questions from the audience

A total of six cases will be selected based on their uniqueness, educational merit and relevance to emergency medicine. Patient identifiers should be appropriately masked and all documents should be marked as PRIVILEGED and CONFIDENTIAL under one or more of the following federal laws: Health Care Quality Improvement Act of 1986 or Patient Safety and Quality Improvement Act of 2005.

Cases submitted by November 4, 2011, will receive notification of acceptance or rejection by January 6, 2012.

Morbidity and Mortality Submission Form

The AAEM Morbidity and Mortality Case Presentations
Submission Deadline: November 4, 2011

Faculty Name / Degree (MD/DO):

Resident Name / Degree (MD/DO):

Send additional information to my: □Home □Institution (address below)

Institution:

Address:

City:

State: __________ Zip: __________

Phone: __________ Fax: __________

E-mail: __________

Disclosure of Relevant Financial Relationships:

First, list the names of proprietary entities producing healthcare goods or services, with the exemption of non-profit or government organizations and non-healthcare related companies with which you or your spouse/partner have, or have had, a relevant financial relationship within the past 12 months. For this purpose we consider the relevant financial relationships of your spouse or partner that you are aware of to be yours.

Second, describe what you or your spouse/partner received (ex: salary, honorarium, etc.) AAEM does NOT want to know how much you received.

Third, describe your role.

Commercial Interest  What Was Received  For What Role?

Example: Company ‘X’  Honorarium  Speaker

☐ I do not have any relevant financial relationships with any commercial interests.

Submission

Submission of signed form indicates acceptance and compliance with all M&M case(s) submission instructions, including final withdrawal date of December 31, 2011, and constitutes a commitment by the faculty to present the M&M case(s) at the Scientific Assembly.

Attestation Statement
I attest that written consent and release of responsibility was granted by patient prior to the submission of M&M case(s).

Faculty’s Signature: ________________

Return Completed Form and M&M (if not sent electronically) to:

Morbidity & Mortality Case Presentations
American Academy of Emergency Medicine
555 East Wells Street, Suite 1100
Milwaukee, WI 53202-3823
Phone: (800) 884-2236 • Fax: (414) 276-3349
Marcia Blackman at mblackman@aaem.org