

Emergency physicians receive Who's Who in Healthcare Awards

On Oct. 20, 2006, the Canadian College of Health Service Executives handed out its "Who's Who in Healthcare" Awards. These were in the areas of Government, Healthcare Collaboration, Hospital Leadership, Healthcare Provider, Medical Research, Health Informatics, Workplace Wellness, Employer, and Group Insurance.¹ Among the 9 recipients were 2 emergency physicians: Dr. Kirk Hollohan and Dr. Eric Grafstein.

Originally a Newfoundlander, **Kirk Hollohan** has worked as an emergency physician at St. Paul's Hospital in Vancouver for almost a decade, where he recently took on the position of Physician Leader for Quality and Utilization Management. In 2005, alarmed by the high prevalence and mortality of sepsis in Vancouver's inner city, Hollohan led a collaborative team of ICU and emergency department (ED) staff in the development and implementation of a sepsis pathway, which begins with immediate identification of septic patients at triage, rapid physician assessment, aggressive early antibiotics, goal directed therapy,² and better collaborative processes to reduce delays to ICU care. Implementation of the sepsis pathway led to a 50% mortality reduction for patients with severe sepsis, and sepsis survivors spent 38% less time in the ICU. This achievement won St. Paul's Hospital the National 3M Quality Award for 2006.

Eric Grafstein, recipient of the Health Informatics Award and a clinician-researcher at St. Paul's Hospital in

Vancouver, recognized a decade ago that the paucity of ED data made it impossible to evaluate departmental processes and quality, or even to describe ED case mix and acuity. Grafstein's objective was to develop efficient methods of capturing ED information by incorporating data acquisition into clinical care processes; hopefully, at the same time improving the efficiency of clinical care. In 2001–02, he and the St. Paul's group were one of the first in North America to implement computerized physician order entry and to develop and link pre-existing hospital databases to facilitate research, quality, and process measurement. Their most recent advance was to develop software that automatically transmits important ED visit data (i.e., presenting complaint, triage level, test results, medications given, procedures performed, discharge diagnosis, and prescriptions) to the patient's family physician within 5 hours of the ED visit. Eventually, Grafstein would like to see data from EDs across the country made available to the public, much like *Maclean's* rankings for universities.

References

1. Profiles available at: www.chmonline.ca/archives/index.jsp (accessed 2006 Dec 11).
2. Rivers E, Nguyen B, Havstad S, et al. Early goal-directed therapy in the treatment of severe sepsis and septic shock. *N Engl J Med* 2001;345:1368-77.



Dr. Kirk Hollohan: Healthcare Provider



Dr. Eric Grafstein: Health Informatics