

Seminar 2

Innovation in Acute Care



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Dr. YC Chan graduated from the medical school of the University of Hong Kong in 1994, and became a specialist in emergency medicine since 2002. He underwent overseas training in clinical toxicology in 2003. He is currently a consultant in the Accident & Emergency Department of United Christian Hospital. He is the chair of the Scientific Affairs Committee, Vice-chair of the Education Committee of the Hong Kong College of Emergency Medicine. He actively participates in training activities for emergency medicine and clinical toxicology. He has over 50 publications in books and peer review journals.

Innovative Emergency Care beyond Emergency Room

Activated charcoal (AC) is a treatment for acute poisoning and its efficacy depends on its time of administration. Since 2010, paramedics have been administering pre-hospital AC to patients after consulting emergency physicians (EPs) from the Hong Kong Poison Information Centre. More than 200 patients per year were given prehospital AC and data suggested the time between poison exposure and AC use were reduced.

ST elevation myocardial infarction (STEMI) is a cardiac emergency diagnosed by ECG. Prehospital ECG is performed in ambulance and transmitted to Accident & Emergency Department (AED) for EP interpretation. A pilot program indicated it is useful in reduction of door to balloon time for STEMI patients.

EP also provide prehospital emergency care for patients via the participation as flying doctors in the Government Flying Service, medical support in local and international sports events in Hong Kong, as well as being the on scene medical team during disasters.

The first emergency medicine ward (EMW) opened in 2007. Currently, nearly all AEDs have EMWs with a total number of approximately 500 beds. Extended care are provided to patients in EMW, primarily by EP. The service cover patients with acute medical, surgical, orthopaedic, toxicological, psychiatric or critical care problems.



Dr. Andrea OY LUK

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Dr. Andrea Luk is a specialist in endocrinology and is currently the Associate Professor at the Department of Medicine and Therapeutics of the Chinese University of Hong Kong. She is also the Non-Oncology Medical Director of the Phase 1 Clinical Trial Centre at the Chinese University of Hong Kong, Honorary Associate Consultant at the Prince of Wales Hospital, and Deputy Medical Director of the Asia Diabetes Foundation. Dr Luk graduated from the University of Auckland, New Zealand, and received post-graduate training in Sydney, Australia and Hong Kong. She obtained her fellowship in endocrinology, diabetes and metabolism in 2007 at the Hong Kong College of Physicians. Her main research focus is in diabetes epidemiology with special interests in diabetic kidney disease and young-onset diabetes. She has published over 90 articles in peer-reviewed journals.

Update on Management of Endocrine Emergencies

With the exception of acute hyperglycaemic complications and hypoglycaemic coma related to diabetes mellitus, other endocrine emergencies including adrenal crisis, pheochromocytoma crisis, thyroid storm and myxoedema coma are relatively rare occurrences. Nonetheless, in view of the non-specific nature of clinic presentation and high mortality rates when treatment is withheld or delayed, frontline clinicians should have a high index of suspicion and be able to make the diagnosis for timely institution of appropriate therapy. In this presentation, I shall summarise the key clinical features, basic investigation and immediate management of these uncommon but important endocrine emergencies, using real life examples of recent cases encountered in our hospital.



Dr. Simon HY TSANG

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Dr. Simon Tsang underwent his undergraduate medical education in the University of Bristol, United Kingdom. He subsequently completed his surgical residency and post-fellowship training in the Department of Surgery, the University of Hong Kong. He is currently Consultant Surgeon in Queen Mary Hospital, Hong Kong. He has a keen interest in hepatobiliary and pancreatic surgery, surgical endoscopy, surgery for trauma, surgical education and hospital management. He is an instructor and course director in the Advanced Trauma Life Support (ATLS) program, having taught in local ATLS courses as well as overseas.

Advances in Surgical Critical Care

"Surgical critical care", as defined by the American Board of Surgery, is a branch of surgery and a primary component of general surgery related to the care of patients with acute, life – threatening, or potentially life – threatening surgical conditions. The discipline involves expertise in the operative management of such patients, as well as essential knowledge and skills in pre – hospital care, resuscitation, support of various organ systems, wound management, rehabilitation and restoration of function.

The care of patients suffering from necrotizing pancreatitis poses one of the greatest challenges to the general surgeon. The 21st century surgical armamentarium to tackle this highly complex and multifaceted problem involves advanced skills in minimally – invasive surgery, fluoroscopic – guided procedures, endoscopy, ultrasonography, and wound closure techniques; in addition to a thorough knowledge of infection, resuscitation, organ support and nutrition.

Surgical critical care starts in the field. Some highly complex diagnostic and therapeutic equipment may be miniaturized for better portability, and adapted for rugged use. However, simple measures are sometimes the most effective lifesavers. We have finally realized that the employment of some of these by the general public, such as the use of tourniquets and wound packing for bleeding, may have a profound impact on improving survival in victims of trauma. The critical care surgeon - trainer is in an excellent position to propagate such skills to society.