1. Ambulatory Emergency Medicine

While practicing exotic animal medicine as an ambulatory practitioner, veterinarians need to be prepared for the inevitable emergency call. Emergencies in exotic animal medicine come in all shapes and sizes and the veterinarian must be prepared for a variety of situations. With the proper training, equipment, and managing client expectations, an ambulatory exotics animal practitioner can successfully address emergencies. This article provides a brief overview in managing emergency cases in an ambulatory exotics animal practice.

2. Emergency Response in the Ambulatory Surgery Center

As more surgeries are moving out of the hospital setting, effective emergency response in freestanding ambulatory surgery centers requires organized preparedness. Rapid, consistent emergency response can be challenged by their rarity of occurrence, fast-paced environment, and relative lack of resources. Anesthesiologists who practice in these settings must be aware of the differences between the management of an anesthetic emergency in the hospital with virtually unlimited resources and staff, versus an ambulatory surgery center with limited resources and slightly different goal: stabilization and transfer of care.

3. Pediatric Oncologic Emergencies

Pediatric patients with cancer, although rarely, do present to emergency departments for first-time diagnosis, as well as for complications of treatment. The presenting symptoms can be vague, so emergency physicians must maintain a high index of suspicion and be aware of guidelines to help direct appropriate care after an initial diagnosis. It is also necessary to know the complications of treatment. Although these patients often seek care in the institution where they receive treatment, many live far from these locations and may present to any emergency department in extremis.

4. A Review in the Treatment of Oncologic Emergencies

Oncologic emergencies are often categorized as a group of metabolic abnormalities associated with the diagnosis of cancer or the initiation of chemotherapy for treatment. These syndromes often arise in the acute setting, demanding an accurate knowledge of the associated condition and current treatment. In this review, we evaluate five oncologic emergencies: tumor lysis syndrome, hypercalcemia, hyponatremia, spinal cord compression, and disseminated intravascular coagulation.

5. Plain Language Emergency Alert Codes: The Importance of Direct Impact Statements in Hospital Emergency Alerts

The nature of an emergency is not predictable, and no two emergencies are alike. In response to this unpredictable nature, healthcare facilities across the nation have adopted a system of emergency codes to notify staff of an emergent situation, often without alerting patients and visitors to the crises. However, the system of emergency codes varies significantly within most states and even within healthcare coalition regions.

6. Hyperbaric Oxygen Therapy Emergencies

Emergent indications for HBO_2 are not only for some of the most serious conditions, but also may be the only modality to directly target the patient's pathophysiology. They are to begin emergently or urgently, but may be limited by either the instability of the patient's condition or transfer logistics. Often these emergent treatments involve several treatments in the first 24 hours for best outcomes.

7. One Health and Emergency Preparedness

Emergencies such as hurricanes, floods and nuclear disasters do not just affect people and the environment; they also affect domestic animals. In this latest article in Veterinary Record's One Health series, Kendra Stauffer and Lisa Conti discuss how One Health considerations are being incorporated into emergency preparedness planning in the USA.

8. Diagnosis and Management of Spinal Cord Emergencies

Most spinal cord injury is seen with trauma. Nontraumatic spinal cord emergencies are discussed in this chapter. These myelopathies are rare but potentially devastating neurologic disorders. In some situations prior comorbidity (e.g., advanced cancer) provides a clue, but in others (e.g., autoimmune myelopathies) it may come with little warning. Neurologic examination helps distinguish spinal cord emergencies from peripheral nervous system emergencies (e.g., Guillain-Barré), although some features overlap.

9. National Characteristics of Emergency Medical Services Responses in the United States

We conducted an analysis of the 2010 National Emergency Medical Services Information System (NEMSIS) research data set, encompassing EMS emergency response data from 29 states. From these data, we estimated the national number and incidence of EMS responses. We also characterized EMS responses and the patients receiving care.

10. Noninvasive Temporary Cardiac Pacing in the Emergency Department: A Review and Update

NTP's superior safety and ease of use compared with other emergent pacing alternatives make it the emergency pacemaker choice for the acute stabilization of patients requiring pacing. The key to its success is timely use. The more quickly it is initiated, the more effective it will be. NTP represents a quick, effective treatment for asystole and symptomatic bradycardia. As emergency nurses, physicians, and paramedics become more experienced with its use, there is increased potential for enhanced survival rates for these patients.

11. Pediatric Urological Emergencies

Although few children are severely ill when evaluated in the pediatric office, developing the skills to recognize an infant or child who requires hospitalization is critical. Some children will require treatment in an emergency department or direct admission to an inpatient facility, whereas other children can be managed as outpatients. Determining when an infant requires an inpatient admission is particularly important because the metabolic reserve is less abundant in the newborn. Patients with hemodynamic instability must be emergently addressed. This article outlines the most common urgent and emergent pediatric urological conditions with the goal to direct initial evaluation and treatment.

12. How to Perform First Aid

RATIONALE AND KEY POINTS: This article aims to help nurses to perform first aid in a safe, effective and patient-centred manner. First aid comprises a series of simple, potentially life-saving steps that an individual can perform with minimal equipment. Although it is not a legal requirement to respond to an emergency situation outside of work, nurses have a professional duty to respond and provide care within the limits of their competency.

13. The Treatment of Snake Bites in a First Aid Setting: A Systematic Review

The worldwide burden of snakebite is high, especially in remote regions with lesser accessibility to professional healthcare. Therefore, adequate first aid for snakebite is of the utmost importance. A wide range of different first aid techniques have been described in literature, and are being used in practice. This systematic review aimed to summarize the best available evidence concerning effective and feasible first aid techniques for snakebite.

14. Emergency Medicine in Japan

There have been few reports published in English on emergency medicine (EM) in Japan; the main reason for this is that the concept of EM was different in Japan from that in western countries. In the 1960s, legislation was passed in Japan that implemented emergency medical services, and emergency hospitals were designated by the government. There were no emergency medicine specialists, and so surgeons/physicians without specialist training in emergency medicine provided care to emergency patients (the multispecialist-type model)

15. Epidemiology and Clinical Characteristics of COVID-19

Since December 2019, there has been an outbreak of a novel coronavirus (COVID-19) infection in Wuhan, China. Meanwhile, the outbreak also drew attention and concern from the World Health Organization (WHO). COVID-19 is another human infectious disease caused by coronavirus. The transmission of COVID-19 is potent and the infection rate is fast. Since there is no specific drug for COVID-19, the treatment is mainly symptomatic supportive therapy.

16. Psychopharmacology of COVID-19

With the rapid, global spread of SARS-CoV-2, hospitals have become inundated with patients suffering from COVID-19. Consultation-liaison psychiatrists are actively involved in managing these patients and should familiarize themselves with how the virus and its proposed treatments can affect psychotropic management. The only FDA approved drug to treat COVID-19 is remdesivir, and other off-label medications used include chloroquine and hydroxychloroquine, tocilizumab, lopinavir/ritonavir, favipiravir, convalescent plasma therapy, azithromycin, vitamin C, corticosteroids, interferon and colchicine.

17. COVID-19: Melatonin as a Potential Adjuvant Treatment

This article summarizes the likely benefits of melatonin in the attenuation of COVID-19 based on its putative pathogenesis. The recent outbreak of COVID-19 has become a pandemic with tens of thousands of infected patients. Based on clinical features, pathology, the pathogenesis of acute respiratory disorder induced by either highly homogenous coronaviruses or other pathogens, the evidence suggests that excessive inflammation, oxidation, and an exaggerated immune response very likely contribute to COVID-19 pathology.

18. The Epidemiology, Diagnosis and Treatment of COVID-19

In December 2019, the outbreak of the novel coronavirus disease (COVID-19) in China spread worldwide, becoming an emergency of major international concern. SARS-CoV-2 infection causes clusters of severe respiratory illness similar to severe acute respiratory syndrome coronavirus. Human-to-human transmission via droplets, contaminated hands or surfaces has been described, with incubation times of 2-14 days. Early diagnosis, quarantine, and supportive treatments are essential to cure patients.