

A
Checklist Manifesto
for the
Rural Doc

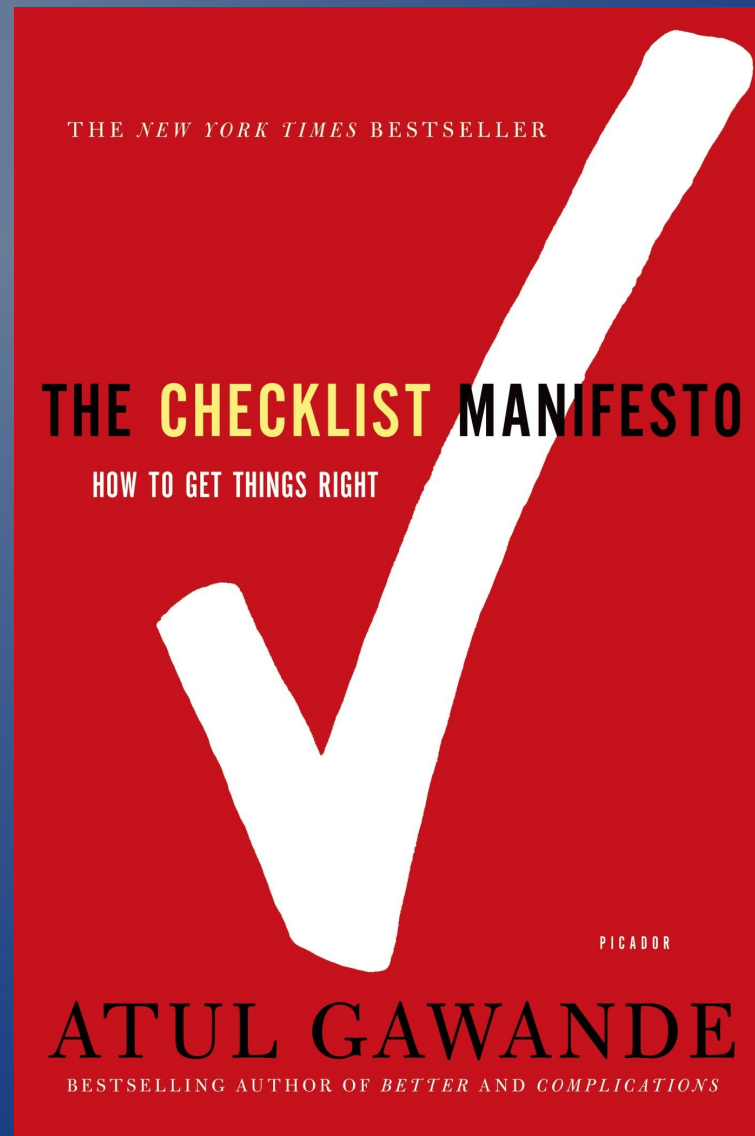
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Overview

- Checklist Rationale
- Cases
- Checklists

Checklist Rationale

- Atul Gawande



Checklist Rationale

- Atul Gawande

“Here, then, is our situation at the start of the twenty-first century: We have accumulated stupendous know-how. We have put it in the hands of some of the most highly trained, highly skilled, and hardworking people in our society. And, with it, they have indeed accomplished extraordinary things. Nonetheless, that know-how is often unmanageable. Avoidable failures are common and persistent, not to mention demoralizing and frustrating, across many fields—from medicine to finance, business to government. And the reason is increasingly evident: the volume and complexity of what we know has exceeded our individual ability to deliver its benefits correctly, safely, or reliably.

Checklist Rationale

1. The volume of medical knowledge has exceeded an individual's capacity to retain all of it

Checklist Rationale

- Atul Gawande

“...a checklist cannot fly a plane. Instead, they provide reminders of only the most critical and important steps – the ones that even the highly skilled professional using them could miss.”

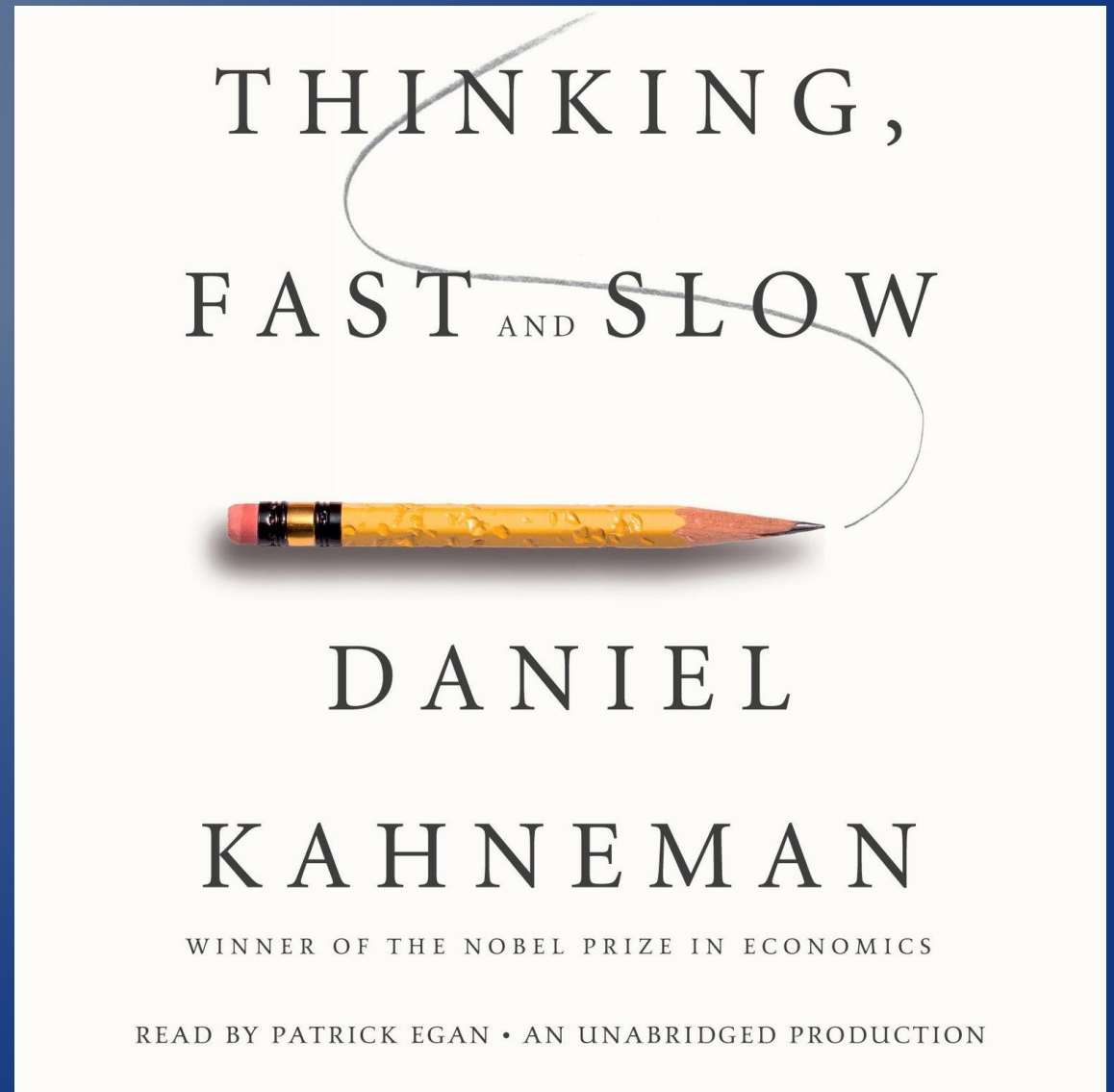
Checklist Rationale

1. The volume of medical knowledge has exceeded an individual's capacity to retain all of it

2. Reminders of critical steps

Checklist Rationale

- Daniel Kahneman



Checklist Rationale

- Daniel Kahneman
- Two types of thinking:
 - System 1: fast, instinctive, emotional
 - System 2: slower, deliberate, logical

Checklist Rationale

- System 1: fast, instinctive, emotional
 - Instinctive/automatic
 - Gut feeling
 - Unconscious gestaltic impression
- Examples:
 - see that an object is at a greater distance than another
 - localize the source of a specific sound
 - complete the phrase "war and ..."
 - display disgust when seeing a gruesome image
 - solve $2+2=?$
 - read a text on a billboard
- System 2: slower, deliberate, logical
 - Pause and reflect/think
 - Calculate
 - Focus attention on a specific task
- Examples:
 - point your attention towards someone at a loud party
 - look out for the woman with the grey hair
 - count the number of A's in a certain text
 - park into a tight parking space
 - solve 17×24
 - determine the validity of a complex logical reasoning

Checklist Rationale

- Much of what we do in an ER is based on System 1 thinking
- Triage note examples:
 - 16 y.o. sore throat
 - 29 y.o. back pain
 - 48 y.o. UTI
 - 23 y.o. migraine
 - 33 y.o. asthma exacerbation

Checklist Rationale

- Much of what we do in an ER is based on System 1 thinking
- Triage note examples:
 - 16 y.o. sore throat ...Ludwig's angina
 - 29 y.o. back pain ...epidural abscess
 - 48 y.o. UTI ...kidney ca
 - 33 y.o. asthma exac ...myocarditis

Checklist Rationale

1. The volume of medical knowledge has exceeded an individual's capacity to retain all of it
2. Reminders of critical steps
- 3. Pause for System 2 thinking to re-evaluate the evidence**

Checklist Rationale

- CPSO/CMPA
 - College under lots of pressure to demonstrate stewardship of the profession to the public
 - Changing medico-legal environment
 - College complaints are often a litmus test for litigation
 - Documentation is key

Checklist Rationale

- CPSO Documents
 - Expectations of Non-EM physicians
 - Draft ER Peer Assessment Handbook

Checklist Rationale

1. The volume of medical knowledge has exceeded an individual's capacity to retain all of it
2. Reminders of critical steps
3. Pause for System 2 thinking to re-evaluate the evidence
- 4. Improve documentation in a changing regulatory/medico-legal environment where expectations of care are rising**

Checklist Rationale

- Checklists are already everywhere:
 - Standardized order sets
 - Triage boxes that RN fills (allergies, vitals, meds)
 - Life support algorithms
 - Medical scoring systems
 - Standardized admit/discharge notes formats
 -

Checklist Rationale

- Checklists are everywhere in medicine...
 - Except they haven't quite penetrated the ER chart where the Hx + Phys page is just blank

Checklist Rationale

- Checklists are everywhere in medicine...
- Atul Gawande

“Good checklists are, above all, practical.”

“Good checklists... are precise. They are efficient, to the point, and easy to use even in the most difficult situations.”

Checklist Rationale

1. The volume of medical knowledge has exceeded an individual's capacity to retain all of it
2. Reminders of critical steps
3. Pause for System 2 thinking to re-evaluate the evidence
4. Thorough documentation in a changing regulatory/medico-legal environment where expectations of care are rising
- 5. Save time**

Checklist Rationale

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5. Save time

Checklist Rationale

They'll make you a better clinician.....

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5. Save time

Checklist Rationale

Also:

- A checklist does not replace your Hx + Phys
 - Adjunct to your Hx and Phys
- Is not a validated clinical decision rule
 - though you could make a checklist for one
- Is very idiosyncratic
 - Based on your pre-existing approaches...
 - ...clinical context
 - ...baseline knowledge
 - ...memory
 - ...

Checklist Journey

- Missed case
- Studying for EM Exam

Cases

- 64 yo male
 - Chronic low back pain from remote MVA
 - Two epidural steroid injections over 1 year, but no help
 - Worsening back pain
 - Admitted for chest pain
 - Found to have metastatic prostate cancer, lytic lesions in ribs, back, hip
 - Died 3.5 years later

Cases

- 51 year old female with chronic back pain
 - In ER for Hx of 1-2 weeks of low back pain
 - Normal neuro exam
 - On Lyrica, elavil
 - Used checklist and admitted to getting back injections from pain clinic
 - MRI showed spinal arachnoiditis infection
 - Admitted with abx, did well, infection resolved

Checklists



Final Thoughts

Atul Gawande

- We don't like checklists. They can be painstaking. They're not much fun... It somehow feels beneath us to use a checklist, an embarrassment. It runs counter to deeply held beliefs about how the truly great among us – those we aspire to be – handle situations of high stakes and complexity. The truly great are daring. They improvise. They do not have protocols and checklists. Maybe our idea of heroism needs updating.”