

4TH INTERNATIONAL SYMPOSIUM
ON
RAPID RESPONSE SYSTEMS AND
MEDICAL EMERGENCY TEAMS



TORONTO

MAY 8 & 9, 2008

SHERATON CENTRE TORONTO HOTEL

MESSAGE FROM THE CONFERENCE CHAIR

Welcome

On behalf of the organizing committee and faculty for the 4th International Symposium on Rapid Response Systems and Medical Emergency Teams I would like to welcome you to Toronto. Toronto is known as one of the most multicultural cities in the world. The city's diversity is reflected in the cuisine, activities, languages and festivals. On a given day English, French, Mandarin, Cantonese, Italian, Portuguese and a score of other languages may be heard throughout the city.

I am extremely excited to share with you the preliminary program for this years Symposium. The symposium has been restructured based upon previous participant feedback. The Symposium will be a mix of plenary discussions, thematic panels, as well as a focus on workshops targeted to the Novice RRS provider, administrator, leader, and patient safety officer. The thematic panels will concentrate on educational issues, research priorities and results, advanced RRS topics. As well, nursing panels and pediatric panels will be presented to target specific topics of interest. Finally, this Symposium will specifically address the growing interest in Rapid Response Systems by government agencies, accrediting bodies, and health services. The Joint Commissions' patient safety goals will be explicitly addressed.


New this year is the inclusion of a variety of pre-conference workshops - presented by the CRI Education Network and ICCU Imaging. There will be two single day workshops. Both adult and pediatric rapid response system provider workshops will be offered. Each workshop is designed to assist the Rapid Response System Provider develop an approach to the acutely ill child or adult, as well as offering an opportunity to practice crisis resource management and communication skills. These courses will utilize classroom didactics, High Fidelity Simulation and CRI net's innovative SimuCases© .

Finally an 'early riser' workshop featuring highlights from our intensive, 2-day end of life communications skills course, featuring presentations and interactive workshops with senior CRI faculty will be offered.

A clinically oriented pre-conference course will be offered to help round out your stay in Toronto. This course will concentrate on the use of bedside ultrasonography within the context of the acutely ill Rapid Response Team patient.

I am thrilled to be able to offer this exciting Symposium to all of you. I hope to see you soon. And in anticipation of that, WELCOME!

Yours truly,



Stuart F. Reynolds
Conference Chair

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INTENT AND OVERVIEW

A Rapid Response System (RRS) is an organized structure of administrative, clinical, and quality improvement functions whose intent is to prevent harm and death in patients demonstrating physiologic deterioration in the hospital.

WHO SHOULD ATTEND

This course is designed for critical care physicians, emergency physicians, paramedics, patient safety officers, hospitalists, hospital based physicians, critical care and general ward nursing staff, hospital administrators, nursing directors, respiratory care directors, and finally resuscitation and clinical outcomes researchers as well as other health care professionals.

CONTINUING MEDICAL EDUCATION CREDIT

The CME will be provided by the office of the faculty of Medicine at a Canadian University that is fully authorized by the Royal College of Physicians and Surgeons of Canada and the American Medical Association, to implement CME activities. CME credits will be available at the end of the conference. The number of credits will depend on the dates of participation.

SYMPOSIUM LOCATION



The conference will be held at the Sheraton Centre Toronto Hotel located in the heart of downtown Toronto's financial and entertainment district. The hotel address is 123 Queen St. West, Toronto, ON, M5H 2M9.

Please note that all pre-conference courses are limited registration. Act quickly to register and take advantage of these valuable courses.



How to Prepare for Critical Care

- CRI Critical Care Education Network was established to give healthcare professionals the confidence and skills they need to effectively treat acutely ill patients
- It takes a lot more than mere book learning to prepare for a crisis situation.
- What is needed is practical, intensive, hands-on training.



CRI Critical Care Education Network (CRI) will be offering two pre-conference workshops and an early riser course. Advance Registration will be required.



We are offering a full-day Adult CCRT Essentials workshop featuring highlights from our intensive 2-day course. We present practical information on the rationale for a rapid response team and we provide instruction and opportunity to practice Crisis Resource Management, ABC (airway, breathing and circulation) assessment, resuscitation interventions, and communication. The workshop features High Fidelity Simulation, technical skills as well as innovative, interactive case-based scenarios.

If you are a RN or RT who:

- Is part of a rapid response team;
- Is considering joining a rapid response team; or
- Would like to learn more about rapid response and resuscitation,

...then this workshop will provide an introduction to, or a review of, key principles and skills. Space is limited so don't hesitate to take advantage of this condensed course offering.



We are offering a full-day Pediatric CCRT Essentials workshop featuring highlights from our intensive 2-day course. We present practical information on the rationale for a rapid response team and we provide instruction and opportunity to practice Crisis Resource Management, ABC (airway, breathing and circulation) assessment, resuscitation interventions, and communication. The workshop features High Fidelity Simulation, technical skills and an opportunity to 'put it all together.'

If you are a RN or RT who:

- Is part of a pediatric rapid response team;
- Is considering joining a pediatric rapid response team; or
- Would like to learn more about rapid response and resuscitation in pediatrics,

...then this workshop will provide an introduction to, or a review of, key principles and skills. Space is limited so don't hesitate to take advantage of this condensed course offering.



A 90-minute "early riser" breakfast workshop including highlights from our intensive 2-day end-of-life communications skills course, featuring presentations and interactive demonstrations of our unique high-fidelity communication scenarios.

If you are a healthcare team member who:

- Participates in end of life discussions with critically ill patients or their families;
- Struggles with the ethics of withholding or withdrawing care; or
- Wishes to improve interdisciplinary team communications,

...then this workshop will review the major issues and introduce you to an approach to end-of-life decision-making and communication.

For all sessions there will be limited registration and a fee. See registration for details.



Bedside Ultrasound for Rapid Response Systems

Tuesday May 6th 2008

Toronto



Program

7:45-8:00: Welcome

Ultrasonography: Basic principles

8:00-8:45:

- > Technical aspects and 2-D imaging
- > Doppler echo

8:45-9:00: Break

The FOCused Cardiac Ultrasound Study (FOCUS)

9:00-10:15: Anatomy, views, orientation - part I

- > Probe positioning, spatial orientation, ...
- > Parasternal long-axis and short-axis views

10:15-11:30: Practical session #1

- > Familiarisation
- > Parasternal long-axis and short-axis views

11:30-12:30 : Lunch

12:30-13:30 Anatomy, views, orientation - part II

Apical 4-chamber and sub-costal views

13:30-14:30: Practical session # 2

Apical 4-chamber and sub-costal views

« Goal-directed » General Ultrasonography

14:30-14:45: Break

14:45-15:15 : Pleural space assessment for free fluid and pneumothorax

15:15-15:45 : Abdominal space assessment (free fluid, aorta and urinary bladder)

15:45-16 :30 : Practical session # 4:

- > Pleural and abdominal spaces
- > Abdominal aorta and urinary bladder

16 :30 : Conclusion of the program.

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ADVANCED TRACK

The advanced track brings together an eclectic mix of clinicians, administrators, educators, and researchers to discuss issues of keen interest to seasoned Rapid Response System providers, researchers, and administrators. The thematic panels and debates will explore organizational theory, the impact of culture on patient safety, the variability of Rapid Response Systems and their efficiency, governmental involvement, return on investment analysis, the use of technology within a Rapid Response System, and the role of a Rapid Response System at the end of life.

Technology and the RRS

Chairs: Dr. Maureen Harvey & Dr. Stephen Lapinsky

New Monitoring & Data Technology - Dr. Michael Buist

Clinical exam vs. Monitoring - Dr. Anne Lippert

Continuous vs. Intermittent Monitoring - Dr. Gary Smith

Administrative and Quality Limb: Advanced Analysis of RRS

Chair: Dr. Gary Smith & Dr. Ann Kirby

Prevention of RRS activation through analysis and remediation - Dr. Michael DeVita

Team Response To Quality - Dr. Michael Buist

How different disciplines interact with a RRS - Dr. Noel Gibney

Structuring a system of audit review - Dr. Ken Hillman

Perhaps not such a Rapid Response! Triage & Palliation

Chairs: Dr. Noel Gibney & Dr. Stuart Reynolds

Rapid Response System and the Diagnosis of Dying - Dr. Ken Hillman

Does every patient discharged from an ICU need RRS follow-up? - Dr. Peter Krause

The Calgary Triage Rules - Dr. Ann Kirby

EDUCATION TRACK

The key to any successful Rapid Response System is an educational intervention. This intervention targets the afferent, efferent and administrative arms of a Rapid Response system. Clinical educational goals are of specific interest and the means by which to achieve these goals will be explored. Educational theory and specific focus on adult education principles, as well as research into educational outcomes will be discussed.

Debate: There should be specific certification for Rapid Response Team Providers

Moderator: Dr. Pierre Cardinal

Pro: Dr. Randy Wax

Con: Dr. Geoffrey Lighthall

CONFERENCE TRACKS

Minisymposium: Training programs and models for Rapid Response Systems

Chair: Dr. Randy Wax & Nicolette Mininni

The Team STEPPS Program. - Dr. Amy Helwig

Medical Education Team rather than Medical Emergency Team - Dr. Michael Buist

Cross-training RRT and RN Response Team Providers in a Teaching Hospital - Dr. Alison Fox-Robichaud

Minisymposium: Multidisciplinary training, simulation and safety

Chair: Dr. Alison Fox-Robichaud & Dr. Michael Buist

Development of Simulation Program to Teach Patient

Safety - Dr. Beth Lavelle

The ALERT course for ward staff - Dr. Gary Smith

Development of a Multidisciplinary Simucase based on a Needs Assessment - Angele Landriault

Development of a Pediatric Critical Care Response Team Provider Course - Dr. Jonathan Gilleland

NURSING TRACK

Nurses are an integral part of any Rapid Response System. A faculty of international professionals will provide a vast perspective on global nursing practice and their issues at hand. Nursing specific topics will be addressed through a plenary address, thematic panels and small group interactions.

Enhancing the role of the RRS Nurse at the bedside

Chair: Donna Goldsmith

The First Five Minutes Protocol and training - Nicki Mininni

Developing competence in recognition of acute deterioration - Sheila Adam

Enhancing Ward nurses capability in vital signs

Bridging the gap between nurses and physicians when calling for acute review - Michael Cass

Friday night at the fights a.k.a. Hockey Night in Canada

A fun filled debate with audience participation

Nurse-led teams or Medical led teams

The Ward that Cried Wolf Debate: The best afferent detection method is: A Simple Calling Criteria Program vs. Modified Early Warning Program

Enhancing effectiveness of Nurses in RRSs

Dedicated nurse responders or the available ICU nurse? - Sheila Adam

Understanding and developing competency in Nurses in RRTs

Developing leadership skills in nurses on RRTs - Nikki Mininni

Expanded roles - prescribing, DNAR decisions, Central line insertion

NOVICE TRACK

The novice track is a workshop designed for those who will plan and/or conduct a rapid response service. The novice track faculty have experience in starting a rapid response service and bring clinical, managerial, research, patient safety, educational and administrative experience to the forefront. This group consists of nurses, physicians, respiratory therapists, managers and administrators.

CONFERENCE TRACKS

Novice track participants will benefit from a review of implementing and sustaining their rapid response service. The following aspects will be reviewed:

Essential Ingredients

Stakeholder Engagement for the RRS Newbie, - Dr. Chris Hayes

Design of the Efferent Limb: Team Selection - Scope of Practice - Scheduling, - Karen Smith

Design of the Afferent Limb: Education / marketing - Training your team - training your hospital, - Janet Riehl

Administrative & Quality Limb

The Administrative Limb - Project Management - Management tools for an RRS - Mary Ellen Salenieks

Team STEPPS - Strategies and Tools to Enhance Communication for Patient Safety - Dr. Amy Helwig

Overcoming cultural and financial barriers

PEDIATRICS TRACK

Pediatric Rapid Response Systems have undergone extensive growth, acceptance and recognition in recent years. The pediatric track conveys the issues of the pediatric patient through thematic panels and an interactive colloquium. An in depth look at the design, implementation, evaluation, and administration of a pediatric Rapid Response Service is examined.

Family Activated PMET

Chair: Dr. Elizabeth Hunt

Parent activation of MET - It really does not increase the calls - so go for it - Rosemary Gibson

The McMaster experience of Family activated PMET - Dr. John Gilleland

Possible barriers to a family activated PMET in a high volume, high acuity children's hospital -

Dr. Afrothite Kotsakis

Parent perspective of family activated PMET - Helen Haskell

Afferent Limb

Identification of a Sick Child - More Important than the PMET?

Chair: Dr. Rich Brilli

Stanford observed a decrease in cardiac arrests post-PMET - What were their calling criteria? - Dr. Stephen Roth

Development and application of the Pediatric Early Warning System - PEWS - Dr. Chris Parshuram

Cincinnati Children's version of a PEW System - Dr. Mike Vossmeier

A nursing perspective on the usability of PEWS: workload and value - Karen Tucker

Efferent Limb

PMET Team Configuration - How important is it?

Review data from survey of children's hospitals on team composition of PMETs - Stephanie Vandenberg

Review perceived pros of a large PMET team, (i.e. PMET replaces Code Team) and data supporting pharmacist's role - Dr. Melania Bembea

Review perceived pros of a small PMET team, i.e. two tiered system, PMET calls Code Team if more people are needed - Dr. Rich Brilli

POLICY TRACK

Policy includes high-level government positions and manifests in all levels of agreements and contracts. The policy track assembles health policy leaders from around the world to discuss Rapid Response Systems and health policy. Key topics to be addressed are how research, clinical stakeholders and critical events have contributed to policy and action and the incentives to implement and fund a policy. The policy track is designed for those currently involved in policy regarding Rapid Response Systems and those seeking to effect system level change.

Policy Development

Chair: Dr. Peter Angood

Models of Governmental Policy - Dr. Bernard Lawless

Quality as a business case - Dr. William Ward

Priority setting in Government Policy - Dr. Charlotte Moore

Policy Implementation

Chairs: Dr. Stuart Reynolds and Dr. Ken Hillman

1. Implementing a regional policy on RRS

2. Implementing a national policy on RRS - Dr. Peter Angood

3. Government of Ontario's Position & Policy on RRS - Dr. Bernard Lawless

Policy Track Round Table Discussion

An opportunity for international policy makers to network with each other and with clinicians, administrators and patient safety advocates.

RESEARCH TRACK

There have been significant developments in research related to patient safety initiatives and Rapid Response Systems. This workshop provides an overview of current literature and acts as a forum to discuss the future direction of Rapid Response Systems research. Thematic panels and pro-con debates will advocate lively discussion pertaining to research methods, data and endpoints.

The Tools of Patient Safety and Quality of Care Research.

How do we best measure the effectiveness of RRSs; what are the relevant research endpoints?

Varying success in implementing and sustaining RRSs. Insights for future research - Dr. Ken Hillman & Dr. Jeffrey Braithwaite

Chairs: Dr. Michael DeVita & Dr. Alan Baxter

Optimization of the RRS Afferent Limb: A discussion of how we develop and validate the best strategies for identifying patients at risk. - Dr. Christopher Parshuram

Optimization of the RRS Efferent Limb: A discussion of how team structure and function can impact effectiveness. What does the literature tell us so far and how can we design studies to best examine "teamness"

AGENDA MAY 8TH

7:00 am - 3:00 pm	Registration			
7:30 am - 8:30 am	Breakfast			
8:30 am - 8:45 am	Welcome and Introductions Stuart F. Reynolds			
8:45 am - 9:00 am	<i>From MET, CCOT, CCRT, RRT TO RAPID RESPONSE SYSTEM</i> Michael Devita			
9:00 am - 9:45 am	Opening Plenary Session Peter B. Angood, MD FRCS(C) FACS FCCM Vice President & Chief Patient Safety Officer The Joint Commission			
9:45 am - 10:00 am	Break			
10:00 am - 10:55 am	A year in review - Chairs: John Ovretveit & Stuart Reynolds 1. The Year in Review: An examination of the published literature for Rapid Response Systems over the previous year and what it adds to the current state of knowledge. - Brad Winters 2. Pediatric RRSs: Advancing the science over the last two years. - Elizabeth Hunt 3. New Answers from the MERIT Study - Ken Hillman			
11:00 am - 12:00 pm	<p style="text-align: center;">Culture and Organizations Chair: Ken Hillman & John Ovretveit</p> <ol style="list-style-type: none"> 1. Organizational Theory - Jeffrey Braithwaite 2. Culture within Organizations' - Peter Angood 3. Cultures within Hospitals - Michael Buist 	<p style="text-align: center;">Novice Workshop - Essential Ingredients</p> <ol style="list-style-type: none"> 1. Stakeholder Engagement for the RRS Newbie - Chris Hayes 2. Design of the Efferent Limb: Team Selection - Scope of Practice - Scheduling -Karen Smith 3. Design of the Afferent Limb: Education /marketing - Training your team - training your hospital- Janet Riehl 	<p style="text-align: center;">Novice Workshop - Essential Ingredients</p> <ol style="list-style-type: none"> 1. Design of the Efferent Limb: Team Selection - Scope of Practice - Scheduling -Karen Smith 2. Design of the Afferent Limb: Education /marketing - Training your team - training your hospital- Janet Riehl 3. Stakeholder Engagement for the RRS Newbie - Chris Hayes 	<p style="text-align: center;">Novice Workshop - Essential Ingredients</p> <ol style="list-style-type: none"> 1. Design of the Afferent Limb: Education /marketing - Training your team - training your hospital- Janet Riehl 2. Stakeholder Engagement for the RRS Newbie - Chris Hayes 3. Design of the Efferent Limb: Team Selection - Scope of Practice - Scheduling -Karen Smith
12:00 pm - 1:00 pm	LUNCH			
1:00 pm - 1:45 pm	Poster Review - Walk around with the Experts Meet the Exhibitors			
1:45 pm - 2:45 pm	Consensus Conference Summation and Recommendations - Michael Devita			
2:45 pm - 3:00 pm	Break			
3:00 pm - 4:00 pm	<p style="text-align: center;">Research Track</p> <ol style="list-style-type: none"> 1. The Tools of Patient Safety and Quality of Care Research. 2. How do we best measure the effectiveness of RRSs; what are the relevant research endpoints? 3. Varying success in implementing and sustaining RRSs. Insights for future research - Kenneth Hillman & Jeffrey Braithwaite 	<p style="text-align: center;">Novice Track Administrative & Quality Limb Chairs: Alan Baxter & Ann Kirby</p> <ol style="list-style-type: none"> 1. The Administrative Limb - Project Management - Management tools for a RRS - Mary Ellen Salenieks 2. Team STEPPS - Strategies and Tools to Enhance Communication for Patient Safety - Amy Helwig 3. Overcoming cultural and financial barriers 	<p style="text-align: center;">Pediatric Track Family Activated PMET Chair: Elizabeth Hunt</p> <ol style="list-style-type: none"> 1. Parent activation of MET - it really does not increase the calls - so go for it. • Rosemary Gibson 2. The McMaster experience of Family activated PMET • Jonathon Gilleland 3. Possible barriers to a family activated PMET in a high volume, high acuity children's hospital. • Afrothite Kotsakis 4. Parent perspective of family activated PMET • Helen Haskell 	<p style="text-align: center;">Policy Development Chair: Peter Angood</p> <ol style="list-style-type: none"> 1. Models of Governmental Policy • Bernard Lawless 2. Quality as a business case • William Ward 3. Priority setting in Government Policy • Charlotte Moore
4:05 pm - 5:05 pm	<p style="text-align: center;">Enhancing the role of the RRS Nurse at the bedside Chair: Donna Goldsmith</p> <ol style="list-style-type: none"> 1. The First Five Minutes Protocol and training - Nicki Mininni 2. Developing competence in recognition of acute deterioration - Sheila Adam 3. Enhancing Ward nurses capability in vital signs 4. Bridging the gap between nurses and physicians when calling for acute review - Michael Cass 	<p style="text-align: center;">Advanced Technology</p> <p>Chairs: Maureen Harvey/Stephen Lapinsky</p> <ol style="list-style-type: none"> 1. New Monitoring & Data Technology - Michael Buist 2. Clinical exam vs Monitoring - Anne Lippert 3. Continuous vs Intermittent Monitoring - Gary Smith 	<p style="text-align: center;">Education Track</p> <p>Debate: There should be specific certification for Rapid Response Team Providers. Moderator: Pierre Cardinal Pro: Randy Wax Con: Geoffrey Lighthall</p>	<p style="text-align: center;">Policy Implementation Chairs: Stuart Reynolds and Ken Hillman</p> <ol style="list-style-type: none"> 1. Implementing a regional policy on RRS 2. Implementing a national policy on RRS: • Peter Angood 3. Government of Ontario's Position & Policy on RRS • Bernard Lawless
5:05 pm - 5:10 pm	Adjourn			

Exhibits Open

AGENDA - MAY 9TH

7:00 am - 8:25 am	Early Riser Breakfast Session: End of Life Communications Workshop (Advanced Enrollment Required)			
7:30 am - 8:25 am	Breakfast			
8:25 am - 8:30 am	Welcome back and Recap Stuart F. Reynolds			
8:30 am - 9:40 am	Why we do what we do! Chairs Michael Devita/Kenneth Hillman Helen Haskell Kevin Leronard Special Guest Speaker			
9:40 am - 9:55 am	Break			
9:55 am - 10:55 am	<p style="text-align: center;">Advanced Track</p> <p style="text-align: center;">Administrative and Quality Limb</p> <p style="text-align: center;">Advanced Analysis of RRS Chair Gary Smith & Ann Kirby</p> <p>Prevention of RRS activation through analysis and Remediation - Michael Devita</p> <p>Team Response To Quality - Michael Buist</p> <p>How different disciplines interact with a RRS - Noel Gibney</p> <p>Structuring a system of audit review - Kenneth Hillman</p>	<p style="text-align: center;">Pediatric Track</p> <p style="text-align: center;">Afferent Limb</p> <p style="text-align: center;">Identification of a Sick Child - More Important than the PAET? Chair: Rich Brillii</p> <ol style="list-style-type: none"> Stanford observed a decrease in cardiac arrests post-PAET- What were their calling criteria? <ul style="list-style-type: none"> Stephen Roth Development and application of the Pediatric Early Warning System - PEWS <ul style="list-style-type: none"> Chris Parshuram Cincinnati Children's version of a PEW System <ul style="list-style-type: none"> Mike Vossmeier A nursing perspective on the usability of PEWS: workload and value <ul style="list-style-type: none"> Karen Tucker 	<p style="text-align: center;">Policy Track Round Table Discussion</p> <p>An opportunity for international policy makers to network with each other; as well as, with clinicians, administrators and patient safety advocates that are actively involved in RRS's</p> <p style="text-align: center;">More to come.</p>	<p style="text-align: center;">Education Track</p> <p><i>Minisymposium: Training programs and models for Rapid Response Systems</i> Chair: Dr. Randy Wax, Nicolette Mininni</p> <ol style="list-style-type: none"> The Team STEPPS Program. - Amy Helwig Medical Education Team rather than Medical Emergency Team - Michael Buist Cross-training RRT and RN Response Team Providers in a Teaching Hospital - Alison Fox-Robichaud
11:00am - 12:00pm	<p style="text-align: center;">Quality and Policy</p> <ol style="list-style-type: none"> What is the standard of evidence to change culture, behaviour and policy What QI research is needed? <ul style="list-style-type: none"> Brad Winters Why bother? Why pay? What does it cost? 	<p style="text-align: center;">Nursing Track</p> <p style="text-align: center;">Friday night at the fights a.k.a. Hockey Night in Canada A fun filled debate with audience participation</p> <ol style="list-style-type: none"> Nurse-led teams or Multidisciplinary teams? Call Criteria or AEWs for detection? Pro-active intervention (sensitivity) or Acute response (specificity)? 	<p style="text-align: center;">Advanced Track</p> <p>Perhaps not such a Rapid Response! Triage & Palliation</p> <p>Chairs: Noel Gibney & Stuart Reynolds</p> <ol style="list-style-type: none"> Rapid Response System and the Diagnosis of Dying- Kenneth Hillman Does every patient discharged from an ICU need RRS follow-up?- Peter Krause The Calgary Triage Rules - Ann Kirby 	<p style="text-align: center;">Education Track</p> <p><i>Minisymposium: Multidisciplinary training, simulation and safety</i> Chair: Dr. Alison Fox-Robichaud, Dr. Michael Buist</p> <ol style="list-style-type: none"> Development of Simulation Program to Teach Patient Safety - Beth Lavelle The ALERT course for ward staff. - Gary Smith Development of a Multidisciplinary Simucase based on a Needs Assessment - Angele Landriault Development of a Pediatric Critical Care Response Team Provider Course - Jonathan Gilleland
12:00 pm - 1:00 pm	LUNCH			
1:00 pm - 2:00 pm	Plenary Oral Presentation - Winners of Abstract & Posters Chairs: Andreas Hvarfner & Babek Saranyi & Ingrid Daley			
2:05 pm - 3:05 pm	<p style="text-align: center;">Research Track</p> <p style="text-align: center;">Chairs: Michael Devita & Alan Baxter</p> <ol style="list-style-type: none"> Optimization of the RRS Afferent Limb: A discussion of how we develop and validate the best strategies for identifying patients at risk. - Christopher Parshuram Optimization of the RRS Efferent Limb: A discussion of how team structure and function can impact effectiveness. What does the literature tell us so far and how can we design studies to best examine "teammess" - M. Peberdy 	<p style="text-align: center;">Nursing Track</p> <p style="text-align: center;">Enhancing effectiveness of Nurses in RRS</p> <ol style="list-style-type: none"> Dedicated nurse responders or the available ICU nurse?- Sheila Adam Understanding and developing competency in Nurses in RRTs - Mandy Odell Developing leadership skills in nurses on RRTs - Nikki Mininni Expanded roles - prescribing, DNAR decisions, Central line insertion 	<p style="text-align: center;">Pediatric Track</p> <p style="text-align: center;">Efferent Limb Structure</p> <p>PAET Team Configuration - How important is it?</p> <ol style="list-style-type: none"> Review data from survey of children's hospitals on team composition of PAETs <ul style="list-style-type: none"> Stephanie Vandenberg Review perceived pros of a large "ramp down" PAET team and data supporting pharmacist's role <ul style="list-style-type: none"> Melania Bembea Review perceived pros of a small "ramp up" PAET team <ul style="list-style-type: none"> Rich Brillii 	<p style="text-align: center;">An International Rapid Response System Society?</p> <p>Chairs: Ken Hillman, Michael Devita, Stuart Reynolds, June Hylands</p>
3:10 pm - 3:20 pm	Adjournment			
3:30 pm - 5:30 pm	Faculty Meeting			

REGISTRATION INFORMATION

You may register for the symposium now. To qualify for the 'early bird' rate, your registration form must be postmarked by March 28, 2008. After March 28, 2008 the registration price will increase. Once registration has been processed, a confirmation letter will be faxed or mailed to you. If you register on-line, you will receive an immediate e-mail confirmation message. **Please note that you must bring this confirmation with you to the conference.**

You may register for the 4th International Symposium on Rapid Response Systems and Medical Emergency Teams via the following methods:

On-line

We highly recommend registering on-line via our secure web site. You will receive an immediate confirmation of your registration. Our web site address is: www.metconference.com

Fax

Attn: Rapid Response Registration
(905) 849-8606

Mail

Mail your registration form to:
Critical Care Rapid Response Teams
Attn: Registration
344 Lakeshore Rd. East, Suite B
Oakville, ON
L6J 1J6
Canada

Cancellation: All cancellations must be in writing and sent via e-mail, fax, or mail. Cancellations postmarked or date stamped before April 15, 2008 will be completely refunded. After April 15, 2008, a \$35 administrative fee will be assessed. No refunds will be made after April 30, 2008. Cancellation requests can be made to:

Critical Care Rapid Response Teams
Attn: Rapid Response Registration
344 Lakeshore Rd. East, Suite B
Oakville, ON
L6J 1J6
Canada
Phone: (905) 849-8299 Fax: (905) 849-8606
E-mail: mroopa@jhylands.com

PRE-CONFERENCE COURSE REGISTRATION FEES

CRI Critical Care Education Network Workshops, May 6 & 7, 2008

\$535 Adult CCRT Essentials Workshop

\$500 Pediatric CCRT Essentials Workshop

'Early Riser' Workshop

\$50 End-of-Life Breakfast Workshop, May 9, 2008

ICCU Imaging

\$800 Bedside Ultrasound in Rapid Response System Seminar, May 6, 2008

Symposium Registration Fees:

Please note the date for the 'early-bird' deadline is March 28, 2008.

All fees are in Canadian Dollars.

Prior to March 28, 2008

\$499 Physician

\$399 Nurse, RT, and Other Health Care Professionals/Administrators

\$299 Resident, Fellow/Registered Nurse Student, and RT Student

After March 28, 2008

\$599 Physician

\$499 Nurse, RT, and Other Health Care Professionals/Administrators

\$399 Resident, Fellow/Registered Nurse Student, and RT Student

Registration Fees include:

- Continuing Education Credit
- Registration and Course Materials
- Continental breakfast, refreshments, and lunch

Special Needs

Participation by all individuals is encouraged. Advance notification of any special needs will help us provide better service. Please notify us of your needs at least four weeks in advance of the symposium by calling (905) 849-8299.

REGISTRATION FORM

Registration Information

Prefix: Mr. Mrs. Dr. Ms. Other _____

First Name: _____

Last Name: _____

* This is how your name will appear on your name badge.

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone Number: _____ Email: _____

Company/Institutional Affiliation: _____

Specialty: _____

Degree: MD DO Resident PhD MPH RN Other (please specify) _____

How did you hear about this conference? _____

Please indicate the conference track(s) of most interest to you: _____

Registration Fee

The registration fee is in Canadian dollars and inclusive of all taxes. This registration includes course material, continental breakfast, refreshments, and lunch service.

Pre-Conference Course Registration Fees: (Please indicate your selection(s) with a ✓)

CRI Critical Care Education Network Workshops, May 6 & 7, 2008

- \$535 Adult CCRT Essentials Workshop
- \$500 Pediatric CCRT Essentials Workshop

'Early Riser' Workshop

- \$50 End-of-Life Breakfast Workshop, May 9, 2008

ICCU Imaging

- \$800 Bedside Ultrasound in Rapid Response System Seminar, May 6, 2008

Symposium Registration Fees: (Please indicate your selection with a ✓)

Prior to March 28, 2008

- \$499 Physician
- \$399 Nurse, RT, and Other Health Care Professionals/Administrators
- \$299 Resident, Fellow/Registered Nurse Student, and RT Student

After March 28, 2008

- \$599 Physician
- \$499 Nurse, RT, and Other Health Care Professionals/Administrators
- \$399 Resident, Fellow/Registered Nurse Student, and RT Student

Total Registration fee enclosed \$ _____

*Note: All fees are in Canadian Dollars

Payment Method

Cheque/Check Please make cheque payable to the Critical Care Rapid Response Teams
Mail your cheque to: **Critical Care Rapid Response Teams**
Attention: Registration
344 Lakeshore Rd. East, Suite B
Oakville, Ontario, Canada, L6J 1J6

Visa MasterCard

Card # _____ Expiry Date _____

Card Holder (as it appears on card) _____

Signature _____

May we send you communication material regarding critical care and rapid response systems and medical emergency teams events and conferences. (Please check one) Yes No

Please email or fax registration **Attn: Registration** at jvillemure@jhylands.com or fax: (905) 849-8606. For further information regarding the symposium please call (905) 849-8299.

ACCOMMODATIONS

The Sheraton Centre Toronto Hotel is located in downtown Toronto at 123 Queen St. W. Toronto, Ontario, M5H 2M9. A block of rooms has been reserved at the Sheraton Centre Hotel Toronto.

Online Booking

Visit the Sheraton Centre Toronto Hotel's secure online group reservation for the Critical Care Response Teams Conference 2008 via www.starwoodmeeting.com/Book/CCRT08

Reservation Line

To make your hotel reservation, please call the Sheraton Centre Toronto Hotel reservation line at 1-800-627-7175. When calling for reservations, please state that you are attending the Critical Care Response Teams Conference 2008 to receive the blocked reduced rate. Room availability cannot be guaranteed after April 8, 2008. The special rate for a standard suite is \$239 per night. Taxes are applicable.

DRIVING DIRECTIONS

From North

Take Highway 400 to Highway 401. Go east to Don Valley Parkway and then south and exit at Richmond Street. Head west on Richmond Street to York Street. Turn right on York Street and then right onto Queen Street.

From East

Take Highway 401 to Don Valley Parkway. Go south to Richmond Street. Exit and go west on Richmond Street to York Street. Turn right on York Street and then right on Queen Street.

From Lester B. Pearson International Airport

Take Highway 401 East to Highway 427 South. Proceed to Queen Elizabeth Way and then head east to Gardner Expressway. Exit at York Street and proceed north to Queen Street.

SOCIAL EVENT

The Rapid Response and Medical Emergency Teams planning committee has organized an evening of cocktails and drinks for everyone to enjoy in the heart of Toronto on May 8, 2008. More details to follow.

TORONTO: THE WEEK OF MAY 3 - 10, 2008

An overview of events taking place in Toronto from May 3-10, 2008

Theatre

Dirty Dancing, Mirvish Productions at the Royal Alexandra Theatre

We Will Rock You, Mirvish Productions at the Canon Theatre

Museum

ROM's Dinosaur Gallery Returns at the Royal Ontario Museum

Sporting Events

Toronto Blue Jays vs. Chicago White Sox on May 3, 4, 5, 2008 at Rogers Centre

Toronto Blue Jays vs. Tampa Bay Devil Rays on May 6, 7, 8 at Rogers Centre

For more information on Toronto and recreation activities, please visit www.tourismtoronto.com

Deadline: March 28, 2008

Abstracts may only be submitted as a PDF via www.metconference.com. You will then click 'Abstract Submission' on the navigation bar. Once you have met the submission requirements, you will click on 'submit abstract' at the end of the page to fill out an online form. When your submission is received, you will be sent a confirmation of receipt. Notification of acceptance will be made within 2 weeks receipt of the abstract. The top abstracts will be asked to make an Oral Presentation during the conference. The remaining chosen abstracts will be part of the Poster Presentations.

Awards:

Several awards will be presented during the meeting.

Abstract Instructions: For abstract specifications and instruction please visit www.metconference.com

There will be a poster viewing session during the symposium. Designated viewing times to be determined. Please be sure that that the presenting author is present at the poster for viewing and discussion and is prepared to provide a brief (2 minute) oral summary of their poster to facilitate discussion and judging.

FACULTY & SPEAKERS

Organizing Committee

Stuart Reynolds	Chair
Michael DeVita	Program Advisor
Ken Hillman	Program Advisor

Abstract Coordinators

Andreas Hvarfner
Sarani Babak
Ingrid Daley

Track Leaders

Stuart Reynolds	Advanced
Randy Wax	Education
Alison Fox-Robichaud	Education
Sheila Adam,	Nursing
Mary Ellen Salenieks	Novice
Elizabeth Hunt	Pediatrics
Bernard Lawless	Policy
Bradford Winter	Research

Invited Speakers

Sheila Adam, RN, M.Nurs.	Angele Landriault, RN
Peter Angood, MD	Stephen Lapinsky, MD
Melania Bembea, MD	Beth Lavelle, MD
Jeffrey Braithwaite, MD	Bernard Lawless, MD
Rich Brill, MD	Geoffrey Lighthall, MD
Michael Buist, MD	Anne Lippert, MD
Pierre Cardinal, MD	Fred Lippert, MD
Michael Cass, RN	Nicki Mininni, RN
Michael DeVita, MD	Charlotte Moore, MD
Kathy Duncan, RN	Jennifer Myers, MD
Rosemary Gibson, RN	Jon Ovretveit, MD
Jonathan Gilleland, MD	Chris Parshuram MD
Donna Goldsmith, RN	Mimi Peberdy
Maureen Harvey, MD	Stuart Reynolds, MD
Helen Haskell, MA	Janet Riehl, RN
Chris Hayes, MD	Stephen Roth, MD
Amy Helwig, MD, MPH	Mary Ellen Salenieks, RN, CAN
Ken Hillman, MBBS, MD	Andrea Schmid RN, PhD
Elizabeth Hunt, MD, MPH	Gary Smith, MD
Andreas Hvarfner, MD	Karen Smith, RN
Noel Gibney, MD	Karen Tucker, RN
John Kellet, MD	Stephanie Vandenberg
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Afrothite Kotsakis, MD	Bradford Winter, MD
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