



**Prehospital Emergency Services
Current Awareness Update
Issue 100, February/April 2023**

The aim of this Current Awareness Update is to provide a digest of information supporting evidence based practice in prehospital emergency services.

The issue name relates to when the contained articles were published- the bulletin is published the following month once the national bulletin has been issued.

This is an edited version of
the update for SWASFT staff

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Prehospital Emergency Services Current Awareness Update – Issue 99, Dec-Jan 2023

With thanks to Matt Holland, LKS ASE Librarian (on behalf of the National Ambulance Research Steering Group).
This Current Awareness Update was commissioned by the National Ambulance Research Steering Group comprising of research leads from ambulance trusts in England, Scotland and Wales and other experts and groups supporting prehospital research. The aim of the group is to support the strategic development of ambulance and prehospital research whether leading, collaborating in or using research.

The research papers have been arranged by the topic headings below:

[Prehospital Practitioners – Professional Development](#)

[Prehospital Research – Methods and Discussion](#)

[Diagnosis & Triage](#)

[Patient Profile](#)

[Helicopter Emergency Medical Services](#)

[On-Scene Interventions](#)

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Adams, E. J., et al. (2023). Effectiveness and implementation of interventions for health promotion in urgent and emergency care settings: an umbrella review [OriginalPaper]. *BMC Emergency Medicine*, 23(1), 1-27.

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Prehospital Research – Methods and Discussion

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Diagnosis and Triage

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Patient Profile

Young People

Amoako, J., et al., (2023). Evaluation of Use of Epinephrine and Time to First Dose and Outcomes in Pediatric Patients With Out-of-Hospital Cardiac Arrest. *JAMA network open*, 6(3).

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Older People

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Helicopter Emergency Medical Services

Ångerman, S., Kirves, H., & Nurmi, J. (2023). Multifaceted implementation and sustainability of a protocol for prehospital anaesthesia: a retrospective analysis of 2115 patients from helicopter emergency medical services [OriginalPaper]. *Scandinavian Journal of Trauma, Resuscitation and Emergency Medicine*, 31(1), 1-10.

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Hennelly, D., et al., (2023). The Development of Helicopter Emergency Medical Services in the Republic of Ireland. *Air medical journal*, 42(3).

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Fuchs, A., et al. (2023). Factors influencing on-scene time in a physician-staffed helicopter emergency medical service (HEMS): a retrospective observational study [OriginalPaper]. *Scandinavian Journal of Trauma, Resuscitation and Emergency Medicine*, 31(1), 1-12.

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On-Scene Interventions

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Appleboam, A., et al. (2023). Evaluation of the prehospital use of a Valsalva assist device in the emergency treatment of supraventricular tachycardia (EVADE SVT): study protocol for a stepped wedge cluster randomised controlled trial. *BMJ open*, 13(6).

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Covid-19 Papers

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Ebrahimian A., et. Al., (2023). Changes in the prehospital emergency technician's resilience during the COVID-19 pandemic: A web-based cross-sectional study. *Health science reports*, 6(4).

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Gaddis, GM,. (2023). Response to "Ambulances Required to Relieve Overcapacity Hospitals: A Novel Measure of Hospital Strain during the COVID-19 Pandemic in the United States". *Annals of emergency medicine*, 81(5).

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Ghafil, C., et al. , J, Y., TM, A., K, I., & K, M. (2023). Prehospital Care of Trauma Patients in Los Angeles County During the Early COVID-19 Pandemic. *The American surgeon*.

Click [here](#) to access abstract, go to <https://discoverylibrary.org/illarticle/> to request fulltext

Further Research Needed

Adams, E. J., et al. (2023). Effectiveness and implementation of interventions for health promotion in urgent and emergency care settings: an umbrella review [OriginalPaper]. *BMC Emergency Medicine*, 23(1), 1-27.

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CONCLUSION: UEC settings have been under-researched and appear to be under-utilised for delivering health promotion activities, except for alcohol prevention. Review level evidence suggests alcohol and smoking interventions are warranted in some population groups. **However, further research is needed to determine the optimal intervention design, content and delivery mode for lifestyle behaviours which are suitable for implementation in UEC settings and promote long-term intervention effectiveness.**

Changes in clinical practice may be needed, including increased training, integration into service delivery and supportive policy, to facilitate the implementation of SBIRT for lifestyle behaviours. Interventions may need to be delivered in the wider UEC system such as urgent care centres, minor injury units and walk-in centres, in addition to emergency departments and trauma units, to support and increase health promotion activities in UEC settings.

Burrell, A., et al. (2023). GP roles in emergency medical services: a systematic mapping review and narrative synthesis. *BJGP open*.

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CONCLUSION: Embedding GPs in EMS might service different purposes depending on context. There is some evidence that GP EMS services may reduce the likelihood of ED conveyance and hospital admission in selected cases; it is unclear whether this is owing to case selection or GP involvement. **Future research should incorporate patients' views and experiences.**

Charlton, K., et al., (2023). The clinical effectiveness of a falls rapid response service, and sex differences of patients using the service: a cross-sectional study in an English ambulance trust. *British paramedic journal*, 8(1).

Available [here](#) to College of Paramedics members. Click [here](#) to access abstract. Go to <https://discoverylibrary.org/illarticle/> to request fulltext

CONCLUSION: The FRRS is clinically effective regarding falls compared to standard ambulance crews. Sex differences existed between men and women using the FRRS, indicating women are further along the falls trajectory than men. **Future research should focus on demonstrating the cost effectiveness of the FRRS and how to better meet the needs of older women who fall.**

Gage, C.H., et al., (2023). Emergency medical services and palliative care: a scoping review. *BMJ open*, 13(3).

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CONCLUSION: EMS have a role to play in out-of-hospital palliative care, however, many challenges must be overcome. EMS provider education, collaboration between EMS and palliative systems, creation of EMS palliative care guidelines/protocols, creation of specialised out-of-hospital palliative care teams and further research have been recommended as solutions. **Future research should focus on the prioritisation, implementation and effectiveness of these solutions in various contexts.**

Tinker, C., Boswell, G., & Foster, J. (2023). How paramedics apply the spinal immobilisation algorithm in trauma patients [research-article]. *Journal of Paramedic Practice*, 15(5).

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Background: Validated criteria are included in the algorithm used in the UK prehospital setting to safely reduce the number of traumatically injured patients requiring full spinal immobilisation. The criteria improve the sensitivity in selecting patients with spinal injuries but evidence how UK ambulance clinicians apply them is sparse.

Aims: This study aimed to identify the knowledge levels and the use of the spinal immobilisation algorithm by ambulance clinicians.

Methods: A quantitative survey used a convenience sample of all frontline clinicians in London Ambulance Service NHS Trust.

Findings: The algorithm is not routinely used when assessing traumatically injured patients at risk of spinal injury; recognition of the algorithm inclusion criteria is poor, especially regarding patients under the influence of drugs or alcohol. There is a belief that too many patients are immobilised unnecessarily.

CONCLUSION: **Research is required on how ambulance clinicians use checklists and paramedic education on spinal immobilisation rules requires review.**

New Ebooks and other resources

- [ABC of Prehospital Emergency Medicine](#)
- [Acute Medicine](#)
- [APM Project Management Qualification Study Guide](#)
- [Applied Statistical Considerations for Clinical Researchers](#)
- [Archival and Secondary Data \(SAGE quantitative research kit\)](#)
- [Beginning Quantitative Research \(SAGE quantitative research kit\)](#)
- [Big Data Mining and Complexity \(SAGE quantitative research kit\)](#)
- [Breaking Bad News : A ten step approach](#)
- [Ciottoni's Disaster Medicine](#)
- [The Electrocardiogram in Emergency and Acute Care](#)
- [Essentials of Human Anatomy and Physiology](#)
- [Evidence-Based Emergency Care : Diagnostic Testing and Clinical Decision Rules](#)
- [Experimental Designs \(SAGE quantitative research kit\)](#)
- [How to Do Research : And How to Be a Researcher](#)
- [An Introduction to Clinical Trials](#)

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- [Mental Health: Intervention Skills for the Emergency Services](#)
- [Podcaster's Audio Handbook : A Technical Guide for Creative People](#)
- [Statistics at Square Two](#)
- [Survey Research and Sampling \(SAGE quantitative research kit\)](#)
- [Understanding Clinical Research : An introduction](#)
- [Winning the Room : Creating and Delivering an Effective Data-Driven Presentation](#)

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