

Tricks of the Trade in Emergency Medicine

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1

Double take: Ultrasound gel sock

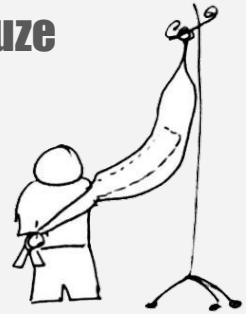
Use centripetal force to get the last bit of ultrasound gel near the tip. Place the ultrasound bottle in a hospital sock and spin it in a circular motion!



2

Double take: Tubular gauze

A. **Passive arm elevation:**
Build a skyhook



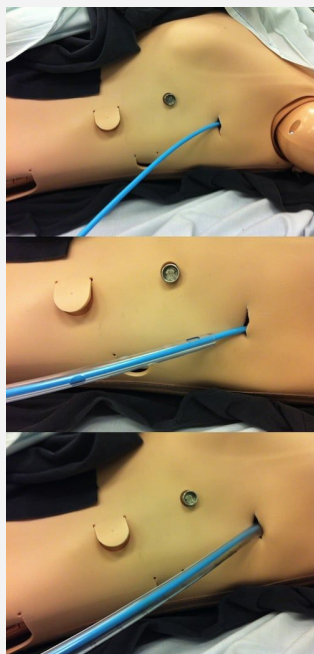
B. **Anterior shoulder dislocation:** Create a loop to assist in counter-traction and another loop to help axial distraction.



3

Double take: Bougie for chest tube

Does your patient, who needs a chest tube, have a thick layer of chest wall soft tissue? Use a bougie as a Seldinger method stylet.



4

Double take: Fluorescein for finding contact lens

Does your patient have a missing contact lens somewhere in their orbit? Use fluorescein to stain the lens, making it easier to find with UV light.



5

Haloperidol: Refractory vomiting



Particularly for:

- **Hyperemesis cannabinoid syndrome** (2021 HaVOC trial)
- **Diabetic gastroparesis** (2017 HUGS study)

6

Tissue adhesive glue can fix anything

- Steristrip + glue
- Avulsed fingernail
- Hair apposition trick for scalp laceration
- Paracentesis leak



7

Single-syringe adenosine with flush for SVT

Avoid the logistical hassle of 2 syringes with adenosine plus a saline flush. Use a single syringe with adenosine mixed in saline, totaling 20 mL. Works just as well.

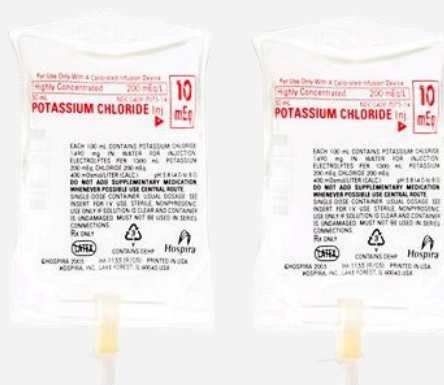


Clin Cardiol 2022.
PMID 35340059

Am J Cardiovasc Drugs 2023.
PMID 37162718

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Potassium IV repletion is so slowwww

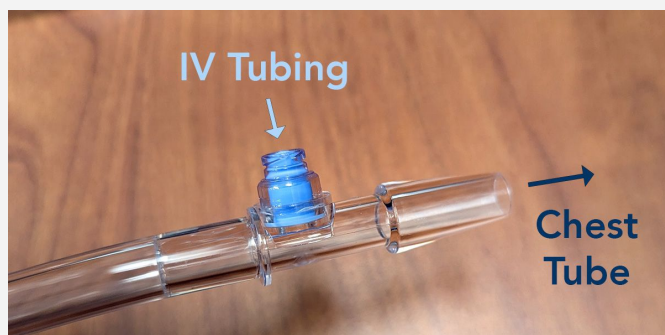


Repletion of IV potassium for severe hypokalemia is rate limited to 10 mEq/hr for peripheral IVs, because of the risk of phlebitis and pain. The limit for central lines is 20 mEq/hr.

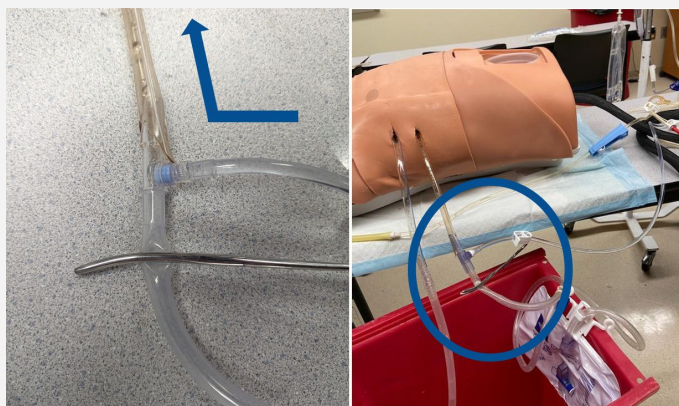
Trick: Place 2 peripheral IV's in different veins and infuse each at 10 mEq/hr. Place the patient on a continuous cardiac monitor during infusion.

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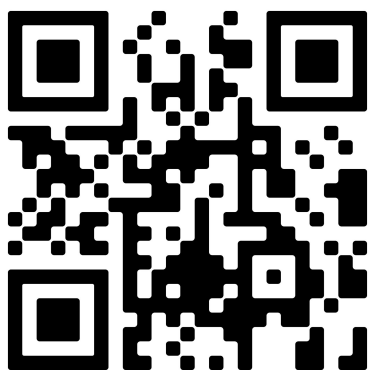
Double chest tube for rewarming



You can instill warm IV fluids into a chest tube for hypothermia rewarming. Use a foley catheter bag, which has a Luer lock IV port (where warm IV fluids will go) AND a large tapered port. Instead of attaching a foley catheter to the tapered port, attach the inflow chest tube. Clamp the foley tubing to prevent IV fluid flow into the foley bag.

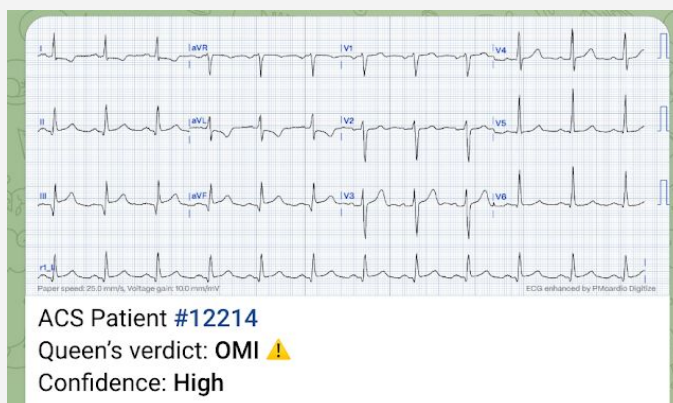


More explanation at ALiEM.com:



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Queen of Hearts AI ECG App



A validated AI ECG model to detect occlusive myocardial infarction (OMI). Performs better than STEMI criteria **to detect an occluded coronary artery needing emergent reperfusion therapy.**

Accuracy 90.9%, sensitivity 80.6%, specificity 93.7%

Similar performance with ECG experts to detect OMI.

*Europ Heart J -
Digital Health, 2023*

Download at PMCardio::

