

Newsletter

Helping people navigate healthcare.

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February
2013

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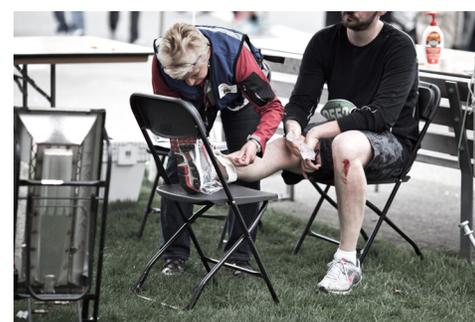
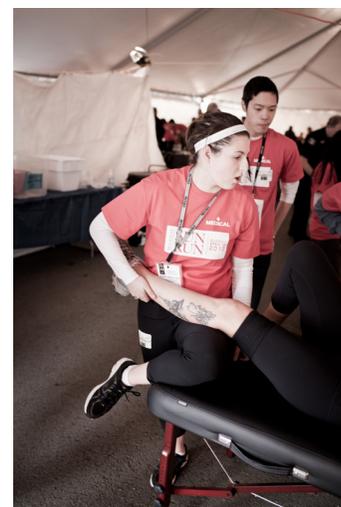
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February is “Heart Month” at Rockdoc. Be sure to keep an eye out for interesting facts on our social media sites and interesting articles relating to our hearts.

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Be a part of the Rockdoc Team for the amazing event season in 2013

SAVE THE DATES

Share in a summer of events, entertainment, medical, and fun with Rockdoc.

Registration will open soon so check back regularly on Facebook and Twitter and watch your email.

The Vancouver Sun Run • Sunday, April 21

Vancouver International Marathon • Sunday, May 5

TBC • Friday- Sunday, June 14, 15, 16

Scotiabank Half Marathon • Sunday, June 23

TBC • Thursday- Saturday, Aug 8, 9, 10

Seawheeze Half Marathon, Yoga and Concert • Saturday, Aug 10

TBC • Sunday, Aug 25

TBC • Sunday, Sept 7

Surrey International Marathon • Sunday, Sept 29

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Registrations will open soon!

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Featured Rock Star: Kelli Smith

Kelli has been a Registered Nurse for 16 years, with double specialty certificates in Prenatal and High Acuity. She first began her Rockdoc involvement in 2008 for the Pemberton Festival. She most enjoys the fun stuff she goes to see and do while volunteering with Rockdoc. Kelli says, "It's totally different nursing than my normal job and I have some desire to be an Emergency nurse, so I live it out vicariously with Rockdoc events... and of course it wouldn't be worth it without the awesome people I get to meet and work with!" Kelli's passion are health care and bettering oneself. In three words she describes herself as

intelligent, hilarious and outspoken and says she is the perfect balance of a city girl and redneck; and according to her, that's what helps her become a good, "rockstar." Kelli couldn't pick just one favourite event she has worked with, instead picked four: Pemberton, Live City at The Olympics, The World Police and Fire Games and Deadmau5. Thank you Kelli for all that you do for Rockdoc. You truly are a rockstar and we appreciate all that you do for Rockdoc.



Social Media Winner

CONGRATULATIONS!!

Congratulations Trevor Norton who was our social media winner of the month! Trevor has won a custom made Rockdoc umbrella, simply because he "likes" us on Facebook! To be eligible to win the social media prize persons must "like" us on Facebook, and "follow" us on Twitter, Instagram or LinkedIn. If you have an account on all four, your name is entered in the draw four times! Once again, thank you for your support Trevor and congratulations!!

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Cardiac Arrest and Successful Resuscitation a 10km Run

Article by Dr. Sam Gutman, The Rockdoc.



Rockdoc began its journey providing medical event service for large-scale mass participation events in 2006 at the Vancouver Marathon. Over the last seven years, we have helped countless people to achieve their goals and dreams and have also cared for numerous people in potentially life threatening situations – none more serious than cardiac arrests. Such critical situations remind us of the importance of the work we do. While Rockdoc always strives to provide a fun and educational experience for our team members, we can never lose sight of the core purpose of a Rockdoc team at any event - to provide the top quality health care, support and positive energy that Rockdoc teams are known for.

The following is an excerpt of a published case report of a critical emergency that occurred at an event a Rockdoc team participated in. It is an example of great people doing great things!

Reference: Lund A, Skitch S, Chew A, et al AMAA Journal Summer 2012, 10-11. AMAA Volume 25, Number 2 Summer 2012

Case Report

The case occurred during a very large-scale 10km run. The patient, a previously well 31-year-old female on no regular medications, collapsed 10 meters past the finish line. Although feeling well during the run, she became light-headed shortly after completing the race, and subsequently collapsed. Seizure-like activity was witnessed. A fellow runner trained in cardiopulmonary resuscitation (CPR) immediately began chest compressions.

First-aiders at the scene requested Advance Life Support back-up from the finish line medical team. Within three minutes, the team arrived with an AED. Analysis revealed a shockable rhythm (ventricular fibrillation), which was converted to sinus rhythm after a single shock. After one additional minute of CPR, there was return of spontaneous circulation as evidenced by a femoral pulse. Within five minutes, the patient began to awaken and was transported on a medical gator through the crowded finishing chute to a standby ambulance, and from there to a local hospital.

On arrival in the emergency department (ED), the initial electrocardiogram (ECG) showed sinus tachycardia at 106 beats/minute. The QTc interval was prolonged at 488ms. Bloodwork revealed no electrolyte abnormalities. The patient was admitted to the Cardiac Care Unit for monitoring and investigation.

She remained hemodynamically stable and demonstrated no evidence of arrhythmia during her hospital stay. Cardiac magnetic resonance imaging (MRI) confirmed the absence of structural cardiac abnormalities. An exercise stress test on Day 3 revealed a QT-interval that failed to shorten with exercise, leading to a relative lengthening of the QTc. A Medtronic™ implantable cardioverter defibrillator (ICD) was implanted on Day 5 and the patient was discharged home on Day 7.

Genetic tests for the five most common long QT mutations were negative. There was no family history of cardiac disease or sudden unexplained death. All immediate family members subsequently underwent screening ECGs, which were normal. The patient has been maintained on beta-blockade and has experienced no further cardiac events or arrhythmias. She has returned to cautious aerobic activity. (Continued on page 5)

Discussion

Running events are increasingly popular, at times involving >50,000 participants with varying experience and fitness levels. Unfortunately, this type of event is occasionally marred by the death of a participant due to sudden cardiac arrest (SCA). Retrospective analysis of data from mass running events reveals that SCA occurs at a rate of 0.55 to 0.8 per 100,000 participants

This case report highlights a successful resuscitation following a witnessed cardiac arrest at a mass gathering event. The most likely etiology for this patient's arrest was congenital long QT syndrome (LQTS). LQTS refers to a group of disorders defined by delayed cardiac repolarization as manifested by a prolonged QT interval on ECG. Individuals with LQTS are predisposed to a characteristic polymorphic ventricular tachycardia, torsade des pointes, which can degenerate to ventricular fibrillation and SCA. LQTS can result from congenital and/or acquired causes. LQTS is caused by mutations in ion channels or related proteins that determine conduction of the cardiac action potential.

Common presentations of LQTS include palpitations, presyncope, syncope, or cardiac arrest. In this population, cardiac events are commonly triggered by adrenergic stimuli such as exercise. The diagnostic approach to LQTS should include a detailed clinical history of the cardiac event, any history of palpitations or syncope, and a family history of SCA or unexplained deaths. Physical examination and cardiac imaging are important for ruling out structural causes. Prolongation of the QT interval on a resting ECG is the hallmark of LQTS. Exercise testing can be a useful adjunct as individuals with LQTS often fail to appropriately shorten their QTc with exercise provocation compared with controls.

Upcoming Events

The Vancouver Sun Run - April 21, 2013

Vancouver International Marathon- May 5, 2013

In honour of heart month, we wanted to share a story, which was submitted through our social media contest. If you have something to say or an article that would be of interest to the Rockdoc Universe submit it to kaitlyn@rockdocinc.com - Additionally, if you have questions please submit them to kaitlyn@rockdocinc.com with the subject line, "Ask the Rockdoc."

This article written by Jenn Thiel, will be sure to pull at your heart strings. Jenn is an ER nurse at Lions Gate Hospital and part of the Rockdoc crew. For more stories written by Jenn, you can visit her website: www.smilewithyourheart.com.

Just Like That

by: Jenn Thiel

A 43 year old female is brought into the ER by the paramedics. Already intubated, CPR has been going for over an hour and a half now. The trauma bay is full, so the acute side it will be. A wide eyed little granny across the way witnesses the young woman being torn of her clothes, leads being put in place, and lines started in a room full of 10 or so people dressed head to toe in blue. And then the curtains close. CPR continues. The electrical rhythm on the monitor signifies a heart unable to perfuse. No clues as to a reason why. Absolutely none.

Twenty minutes in, the doctor calmly reports that if no signs of life return, this will be the last shock. The machine is charged, for the last time, to 200 Joules. All clear, everybody clear. Shock. Hoping, hoping. Pulse check. Hoping. Nothing. The code is called at 2145. Just like that.

That's it. Just like that. A young, healthy woman who was out walking her dog 3 hours earlier is now being cleaned and properly presented so that her family does not have to see the blood, the tubes, the remnants of lost hope. Her 8 and 10 year old daughters and husband will see their loved one peaceful and calm. No more yelling, no more panic.

As I overhear the tears and screams of terror coming from the room with closed curtains, I try to hide the tears that are wanting to start from inside of me. How could this be? Why THIS family? They are so young. They had no idea. It's not fair. It's just not fair.

As I try to redirect my attention and focus on the rest of my assignment, mildly distraught and definitely shaken up, I start to reflect on my own life. I start to think: When's the last time I told the people I care about most that I love them? Have I made sure to tell them how I really feel? How much they mean to me?? Have I made enough time for them? Have I?

We have no idea when this life we often take for granted will be taken away from us. It is much too precious. Tell your loved ones you love them. Without any expectations. Without any fear. Just tell them. Just like that.