CIAP News May 2024

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CIAP Training & Upcoming Workshops:

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CIAP Newsletter

Upcoming training session: Evidence-Based Practice Workshop

When: May 15, 2024 08:30 - 16:00

Where: Online

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PROGRAM

In this edition, we cover:

- CIAP's latest essential nursing resources
- Pharmacogenomic indications in Australia
- A new trial of automated outbreak detection
- Artificial intelligence in healthcare

All access provided by CIAP.

COAP

CIAP's Latest Essential Nursing Resources: Lippincott Advisor & Lippincott Procedures

Lippincott Advisor and **Lippincott Procedures** are the Clinical Information Access Portal's (CIAP) most recent **evidence-based resources written by nurses for nurses**. These point of care resources support consistent patient care and improved patient outcomes.

Lippincott Advisor:

Provides point of care access to evidence based summaries of diseases, intervention and treatment practices, and other common nursing topics needed at the bedside.

With instant access to online references at the point of care, this resource allows nurses to identify the information they need quickly and easily, and provides nurses with the **clinical decision support** they need to make complex care decisions.

Lippincott Procedures:

Provides access to the latest evidencebased, **step-by-step clinical guidance** for nursing procedures and skills - right at the bedside.

Gain access to detailed descriptions of procedures with complete instructions:

- equipment needed
- preparation guidelines
- implementation steps
- special considerations
- patient teaching information
- documentation
- references

For support and training in using these resources, see the <u>CIAP Training Events page</u> or <u>request a customised training session</u>.

What is the diagnosis?

This skin condition is an acquired hypopigmentation of the skin and mucous membranes. Depigmented macules and patches appear on the skin and can also affect the hair follicles, inside the mouth, or in the eyes.

This condition is characterised into two groups: segmental, where a segment of the body is unilaterally affected, and non-segmental, where both sides of the body are affected bilaterally and symmetrically.

The exact pathophysiology and causes are unknown; however it is generally accepted that this condition involves an autoimmune process that causes the absence or destruction of melanocytes. The onset of this condition can occur at any age, and affects about 1-2% of the world's population.

What is the diagnosis?

Find out the answer here in Lippincott Advisor.

Pharmacogenomic Indications in Australia



This resource provides consensus-based guidance to Australian healthcare practitioners about drugs for which pharmacogenomic testing may be indicated.

Pharmacogenomics is a field of precision medicine that applies knowledge of human genetic variation to individualise drug prescribing. It aims to prevent adverse drug reactions and improve drug effectiveness. Pharmacogenomic testing is available in Australia.

Pharmacogenomic testing can be done:

- Reactively; after a drug has caused side-effects or has not had the expected therapeutic response, and
- Pro-actively; in advance of a specific prescribing decision to predict the likelihood of therapeutic response or adverse reaction to that drug.

A pharmacogenomic result is just one factor to consider in making prescribing decisions.

Learn more about pharmacogenomic tests in the <u>Royal College of Pathologists of Australia</u> (<u>RCPA</u>) <u>Manual</u>.

A Trial of Automated Outbreak Detection to Reduce Hospital Pathogen Spread



Healthcare-associated infections are a leading cause of preventable morbidity and mortality. Some of these infections are attributed to outbreaks resulting from transmission of microorganisms to patients from health care personnel, other patients, or contaminated surfaces or equipment.

Researchers conducted cluster-randomized trials in 82 community hospitals where half of the hospitals used automated statistical surveillance of microbiology data to alert infection prevention programs to respond to outbreaks. Real-time alerts did not significantly reduce additional outbreak cases in the context of an ongoing pandemic.

See the article in the New England Journal of Medicine Evidence for more information.

Artificial Intelligence in Healthcare: Nothing About Me Without Me



"The advent of AI in healthcare is here, and we need to proceed with both enthusiasm and caution." (Sullivan, C. & Pointon, K.)

The adoption of digital health has accelerated markedly in response to global healthcare challenges. One transformative technology is artificial intelligence (AI), particularly generative AI, such as ChatGPT. This step change suggests that we are experiencing a new industrial revolution, the data revolution.

The public understand that doing nothing with regard to AI in healthcare is not an option and that we should proceed to accept it with important caveats regarding governance and privacy. Enabling appropriate use of healthcare-derived data is important for improving outcomes, but so is maintaining privacy and ensuring that people retain control of their personal data. This editorial explores the essential components of doing so and highlights the need for an understanding of public perception of data-driven improvement in healthcare.

Read more in the Medical Journal of Australia (MJA).

Learn how to integrate CIAP's resources into your daily practice



CIAP offer interactive, online group training, tailored to meet your team's unique needs. These 1-hour sessions include a navigational overview of the Clinical Information Access Portal and a demonstration of its most commonly used resources.

Discover how CIAP can boost your team's clinical decision-making and evidence-based practice - Click here to request a CIAP Overview.

Upcoming CIAP Events

Workshops

Evidence-Based Practice Workshop May 15, 08:30 - 16:00

> Allied Health Workshop May 30, 08:30 - 16:00

> > Register Here



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