# Decision Making in Emergency Critical Care

An Evidence-Based Handbook

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# Decision Making in Emergency Critical Care

## An Evidence-Based Handbook

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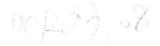


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To John and Marlene for a lifetime of support, to Rani for her editorial genius, and to Morgan for never letting me forget the bigger picture

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## PREFACE: FROM THE EDITOR

Emergency physicians are caring for a growing number of critically ill patients. This increase in ED-critical care volume, coupled with prolonged patient stays, has placed new demands on the emergency physician. He or she must now provide not only acute resuscitative care, but also extended management of complex cardiac, pulmonary, and neurologic emergencies.

Leadership in the field of emergency medicine has embraced this broadening ED-ICU overlap in a timely and skillful manner. Residency program directors are placing new emphasis on critical care medicine in resident education and clinical training. Nationally, emergency departments have become a focus for evidence-based trials in goal-directed therapy for the critically ill. And finally, in a much-anticipated collaboration, the American Board of Emergency Medicine (ABEM) and the American Board of Internal Medicine (ABIM) have agreed to allow graduates of emergency medicine residencies to sit for board certification in critical care medicine following fellowship training.

Decision Making in Emergency Critical Care: An Evidence-Based Handbook is a portable guide to diagnosis and treatment in emergency critical care for the resident and attending emergency physician. Its collaborating authors include fellows and attending physicians in the fields of emergency medicine, pulmonary and critical care medicine, cardiology, gastroenterology, and neurocritical care. It is not intended as a guide to what emergency physicians already do best; namely, recognize and correct acute lifethreatening conditions. Rather, it details the fundamentals of critical care medicine for the emergency physician who must make sustained data-driven decisions for the critically ill patient in an often chaotic and resource-limited environment.

Each chapter provides a streamlined review of a common problem in critical care medicine, evidence-based guidelines for management, and a summary of relevant literature. The result, we hope, is a valuable guide to rational clinical decision making in the challenging—and changing—world of emergency critical care.

John E. Arbo, MD

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