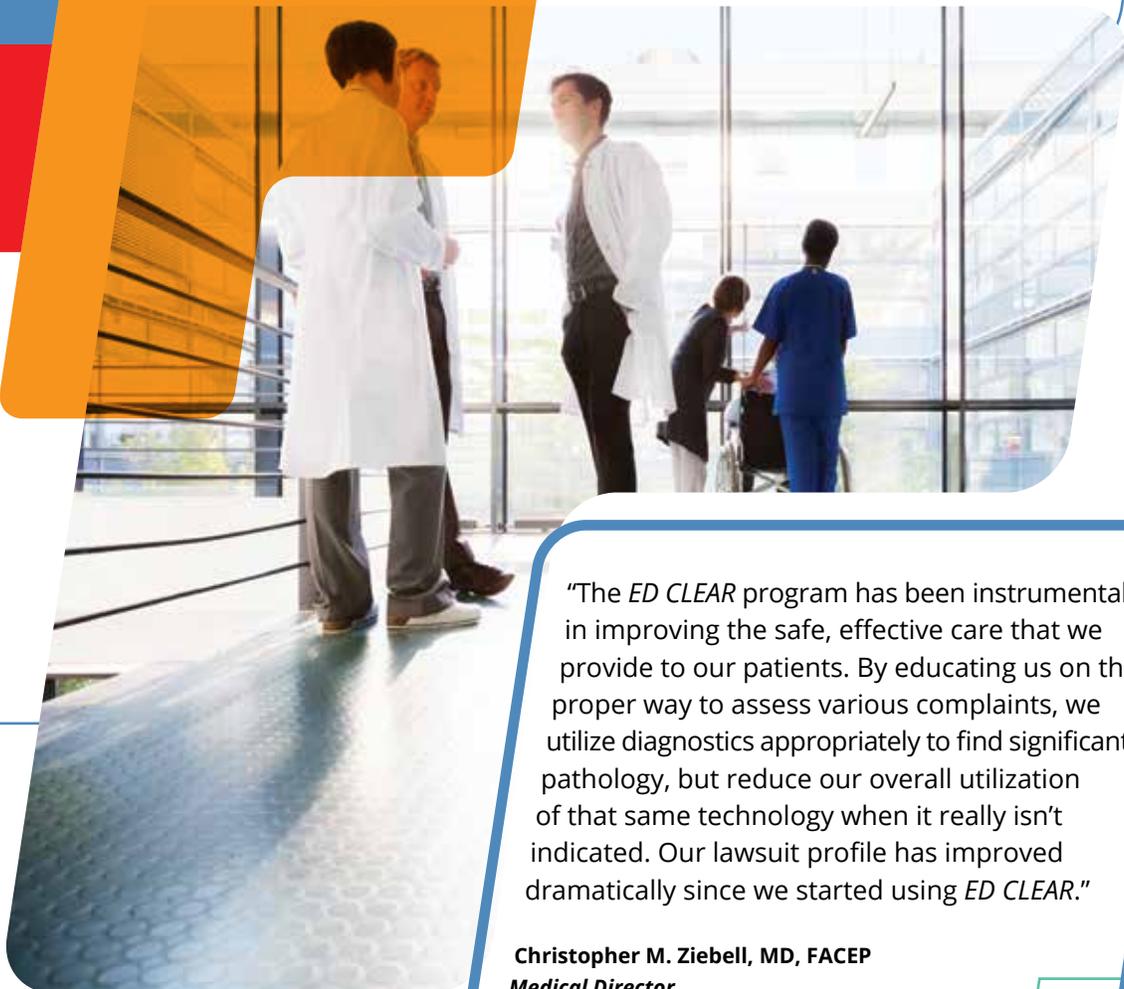


Evidence-Based Decision Making

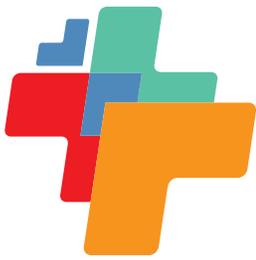
For Emergency Medicine Clinicians



"The *ED CLEAR* program has been instrumental in improving the safe, effective care that we provide to our patients. By educating us on the proper way to assess various complaints, we utilize diagnostics appropriately to find significant pathology, but reduce our overall utilization of that same technology when it really isn't indicated. Our lawsuit profile has improved dramatically since we started using *ED CLEAR*."

Christopher M. Ziebell, MD, FACEP
Medical Director





Give Your ED Clinicians The Training They Need To Succeed

Emergency department clinicians need and want more patient safety training — not only to reduce risk, but also to sharpen their critical thinking and clinical decision-making at the point of patient care. That's when lessons are learned and training really counts, when CME has the power to impact outcomes.

Consider the facts:

- **The average emergency medicine malpractice payment is \$311,088.¹**
- **Misdiagnosis is the top cause of medical malpractice payouts.²**
- **Diagnostic errors represent the largest share of total malpractice payments.²**

These numbers can be significantly lower and the statistics dramatically better for your ED if you offer real-world CME to augment on-the-job-learning. That's why your clinicians need *ED CLEAR* —Clinical Learning To Eliminate Avoidable Risk.

ED CLEAR is a risk-reduction solution for group practices and hospitals. *ED CLEAR*'s practical skills training focuses on safety issues and resource demands that are ever present in emergency medicine. This transformative training provides evidence-based, proven-in-practice approaches to reduce risk, right along with well-defined ways to optimize resource utilization and improve documentation.

¹ "America's Emergency Care Environment: A State-by-State Report Card," American College of Emergency Medicine, 2014.

² "Improving Diagnosis in Healthcare," Institute of Medicine, 2015.

"It is essential to maintain the focus on patient outcomes and on the mission to prevent patient injuries and bad outcomes rather than on preventing lawsuits. This positive, patient-focused approach opens the mind to consider all the possible proactive measures that might improve care."

Dusty Otwell, Esq.
Associate General Counsel, Emergency Service Partners

Founded On Evidence, Grounded In Practice

ED CLEAR is a hard-hitting CME program by design. It's meant to transform behavior and clinical practices, to get results, and to generate measurable returns.

ED CLEAR's developers — practicing emergency physicians and an on-call malpractice attorney and risk management director — research hundreds of cases, claims, and outcomes each year. They examine organ systems involved, disposition, doctor-patient communication, documentation, and specific cases based on grading of history/physical, treatment, testing, resource utilization, and synthesis. Their data analysis reveals the major missteps that pose the biggest risks and result in the highest payouts for EDs around the country.

ED CLEAR subscribers benefit from lessons learned the hard way – in someone else's ED – and from best practices developed by a 600-physician system that markedly and rapidly improved its own risk profile.

The *ED CLEAR* Approach Is Designed To Yield:

- Fewer Claims
- Reduced Costs
- Better Outcomes
- Improved Utilization

ED CLEAR is designed to generate sustainable results by changing the way physicians, PAs, nurse practitioners, and others on the emergency medicine team perform in the ED.

Unlike other risk management programs, *ED CLEAR* doesn't preach defensive medicine, overcompensating with a blanket approach to ordering tests and/or imaging. Instead, the creators describe this blended learning program as "prospective, objective, and defensible." *ED CLEAR* trains your team to put risk assessment before resource utilization—which results in fewer missed diagnoses and better use of resources.

Consider the case of a 34-hospital system with more than 1.2 million ED visits per year. After implementing *ED CLEAR* training, the group reported:



20%
REDUCTION IN
INSURANCE COSTS

Lower insurance costs: They've saved millions of dollars already, thanks to a 20% reduction in insurance costs.



73%
LOWER THAN THE
INDUSTRY AVERAGE

Lower claim rate: The group boasts a claim rate that is 73% lower than the industry average.



**REDUCED
MISSTEPS**

More "catches": Physicians at one of the EDs caught three vertebral artery dissections in just the past eight months. The physicians credited *ED CLEAR* training for the knowledge they needed to detect and diagnose these dissections.



0
CLAIMS
IN FIVE YEARS

Fewer claims: System-wide, they've had zero claims in five years for missed stroke and spinal epidural abscesses – even with a 25% increase in patient volume.



**MITIGATE
RISKS**

More defensible—and more consistent—treatment decisions and documentation: Administrators see less variability among physicians and facilities now that they have training on the consistent application of best practices in high-risk situations. They say the guidance clinicians get from *ED CLEAR* boosts their confidence and relieves stress.



What Sets *ED CLEAR* Apart?

- Founded on evidence-based methodologies and a positive approach
- Topic selection based on current and ongoing analysis of national legal decisions and claims data
- Utilization of mental models and mnemonics to lock in lessons
- Engaging and compelling video segments produced by a veteran practicing emergency physician, storyteller, and filmmaker
- Emphasis on day-to-day best practices to manage risk
- Focus on realistic and representative ED cases, not ultra-rare "black swan" events
- Show-plus-tell, multimodal instruction delivered by emergency medicine specialists and subject-matter experts
- Guidance on "just-right" use of resources
- 27 CME credits per practitioner, per year, at an affordable rate
- Customized CME reporting capabilities
- Convenient "learn-anywhere" web-based training

Comments from users show that *ED CLEAR* is making a real and positive impact:

"I will now have a lower reliance on routine imaging and more focus on physical exam and history."

"I am now more aware of risk stratification."

"Nausea and vomiting, headaches, and seizures will be approached with more thoroughness."

"The HINTS+NIHSS+gait is great!"

"I will more confidently and accurately explain to patients the value in admission/observation after TIA, as well as the value of lifestyle changes in reducing their risk of stroke."



Dr. Bedolla concludes each video with inspirational discharge orders:

"We hope this episode of *ED CLEAR* will help you approach TIA fearlessly, but with the appropriate respect."

John Bedolla, MD, FACEP
Editor-in-Chief, *ED CLEAR*



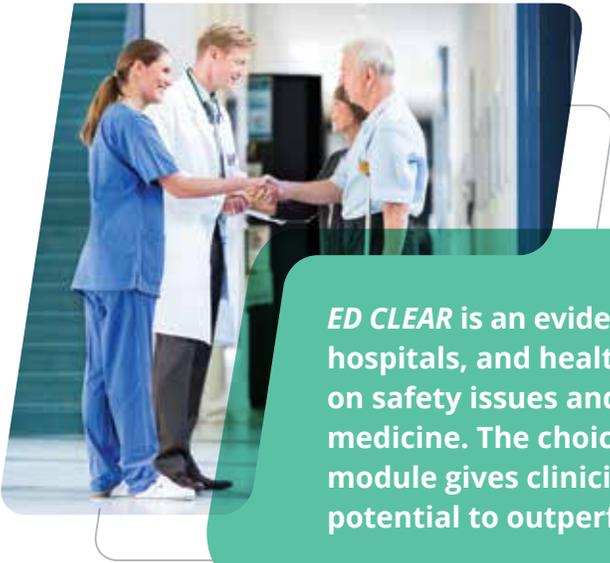
Content & Training Partner

EB Medicine is the industry's leading provider of evidence-based diagnosis and treatment recommendations. A mission-based company with more than 15 years' experience in emergency medicine and CME, EB Medicine is committed to improving the lives of clinicians and their patients. *ED CLEAR* is one of the company's many products developed and offered to meet this mission.



For more information on *ED CLEAR*, contact Susan Woodard at 1-800-249-5770, extension 104, or susan@ebmedicine.net.

For more information, visit: www.ebmedicine.net/EDC



ED CLEAR is an evidence-based risk-reduction solution for group practices, hospitals, and health systems. *ED CLEAR*'s practical skills training focuses on safety issues and resource demands ever present in emergency medicine. The choice-architecture model at the heart of each training module gives clinician learners strategies and interventions with potential to outperform protocols and rule-based decision-making.

The *ED CLEAR* Approach: Prospective, Objective, Defendable

ED CLEAR uses a blended learning approach built upon three distinct educational components:



1 → A best-practices video: In each high-impact 20-minute video, program host John Bedolla, MD, a practicing emergency medicine physician and risk management expert, interviews an ED peer known for a particular area of subject-matter expertise. They play out reality-based scenarios, deconstruct challenging clinical choices, and debate the pros and cons of various interventions. A supplemental animated segment gives learners mental models and mnemonics that lock in the peer-led lessons. Viewers gain an understanding of how to apply risk assessment scales, validated predictors, and diagnostic approaches shown to yield sound, defensible decisions, thus honing their clinical decision-making capabilities.



2 → A current and comprehensive journal article: Additional evidence-based diagnosis and treatment recommendations, decision-making algorithms, risk management pitfalls, and case studies come in the form of a peer-reviewed journal article. Each in-depth issue contains an extensive list of references with the type of study and number of patients, so readers can judge the quality of the literature supporting the recommendations.



3 → Online CME assessment with instant scoring: Learners complete an online assessment requiring them to apply the principles of study and test their knowledge. Testing is easy and can be done on a computer, smartphone, or tablet. Individual and group CME reports are provided and can be customized for the convenience of CME directors and administrators.

EB Medicine is accredited by:



ED CLEAR focuses on the most-litigated, highest-cost issues and challenges in emergency medicine, including:

- TIA & Stroke
- Testicular Torsion
- Necrotizing Fasciitis
- Bouncebacks & Return Visits
- Appendicitis
- Physician Wellness

Future modules will cover hot topics like pulmonary embolism, EMTALA, fatal pneumonias, cardiac arrest and heart scores, pediatric trauma, sepsis, TBI, atypical stroke, pediatric asthma, drowning and submersion injuries, ethics in the ED, and more.

Six ED CLEAR modules are produced annually. Each module qualifies for 4.5 CME credits, for a total of 27 CME credits per year.



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Meet the *ED CLEAR* Team

John Bedolla, MD, FACEP Editor-in-Chief



Dr. Bedolla is Assistant Director of Research Education and Assistant Professor of Emergency Medicine at the Dell Medical School at the University of Texas. He is also a practicing emergency medicine physician who has held a number of leadership positions in the hospital and emergency medicine settings. He has reviewed hundreds of emergency medicine malpractice cases and claims in his capacity as a peer review director and physician liaison for a state medical board and as a mortality and morbidity director. He is a member of the American College of Emergency Physicians' Medical-Legal Committee. Dr. Bedolla writes, animates, produces, directs, and hosts *ED CLEAR*'s video segments.

Andy Jagoda, MD, FACEP EB Medicine CME Course Director



Dr. Jagoda is a Professor and Chair of the Department of Emergency Medicine at Icahn School of Medicine at Mount Sinai, and Medical Director of Mt. Sinai Hospital in New York. Dr. Jagoda has been recognized around the world as an expert on neurologic emergencies, including seizure disorder in the ED and traumatic brain injury, and he is an active member of the American College of Emergency Physicians, the Society for Academic Emergency Medicine, the Council of Residency Directors, and the New York Academy of Medicine. He is also editor-in-chief of EB Medicine's flagship journal, *Emergency Medicine Practice*.

Dusty Otwell, Esq. Legal Advisor & Contributor



Mr. Otwell is Associate General Counsel at Emergency Service Partners. He directs the group's risk management program and provides oversight and legal services in areas including compliance, malpractice litigation, medical board actions, freestanding emergency departments, inpatient critical care and outpatient clinics, insurance, and legislative affairs.

"Most risk-management programs are intended to make you afraid. In contrast, *ED CLEAR* is designed to inform and transform, to enhance patient safety and outcomes while at the same time improving efficiency and resource utilization."

John Bedolla, MD, FACEP
Editor-in-Chief, *ED CLEAR*



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