Effect of an Incentive Spirometer Patient Reminder

What is the effect of a use-tracking incentive spirometer reminder on patient adherence and clinical outcomes after coronary artery bypass grafting surgery? In a randomized clinical trial of 160 patients, Eltorai and colleagues found that the patient reminder improved incentive spirometer use adherence and reduced atelectasis severity, early postoperative fevers, noninvasive positive pressure ventilation use, intensive care unit length of stay (by a day), and 6-month mortality rates.

Every Day Matters: Longer Duration of Prophylaxis and Harm

In a large cohort study at a VA medical facility, Branch-Elliman and colleagues found that every extra day of antimicrobial prophylaxis increases postoperative adverse events but does not improve rates of surgical site infections. Findings support guideline recommendations that antimicrobial prophylaxis should not be continued after skin closure. Limiting antimicrobial exposure to intraoperative and preoperative doses only is a rare opportunity to simultaneously improve care and reduce medical costs.

Health Disparities in Patients Waitlisted for Kidney Transplants

Patients with inactive kidney transplants have a higher mortality rate, so knowing how racial groups differ in status changes is fundamental to understanding health disparities. A multistate model of 42,558 patients was constructed by Kulkarni and colleagues. The authors found that disparities persist after listing; individuals from underserved populations are less likely to become active and therefore are less likely to compete for kidney transplants.

Transitioning Planning for the Senior Surgeon

Aging is associated with declines in cognitive and psychomotor performance, but only limited guidance is available on how to monitor physician performance. The Society of Surgical Chairs developed recommendations for transitioning senior surgeons, including mandatory cognitive testing of surgeons by age 65 years, as part of ongoing professional practice evaluation; transition discussions beginning in early career; and creation of teaching, mentoring, and administrative opportunities for senior surgeons.

Diagnosis and Research in Acute Compartment Syndrome

This systematic review of 51 studies presents the current invasive and noninvasive diagnostic modalities for acute compartment syndrome and existing research models. There is a need for modalities that can provide continuous monitoring to establish a reliable threshold, which is currently lacking in all modalities. There is also a need for a research model that accurately simulates the circumstances of interest in acute compartment syndrome in a given study.