Improvement of Handover and Information transfer for Good Hospital treatment in critical patients with video connection (5G)

No registrations found.

Ethical review	Positive opinion
Status	Recruiting
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON21423

Source
NTR

Brief title
HIGH-5 trial

Health condition

Trauma, resuscitation, critically ill patients

Sponsors and support

Primary sponsor: AMC
Source(s) of monetary or material Support: AMC

Intervention

Outcome measures

Primary outcome

Amount of information transferred during handover, time taken to transfer information

Secondary outcome

Logistics and preparation (time and resources used), 30 day mortality/complications

Study description

Background summary

We propose to build, validate and implement a technological platform solution to address communication errors head on and support prehospital care professionals outside the hospital with an in phase development of;
A real-time audiovisual link (5G) in the ambulance to optimise communication between ambulance personnel and emergency physicians in the hospital to (get) advice on differential diagnosis, priorities, treatment and ultimately thereby improve communication and also handover as the hospital is involved. By doing so, we can;
1. Evolve a system of immediately available automated medically specialized care in the pre-hospital setting.
2. Evolving information transfer by live communication between ambulance providers and receiving hospital physicians.
3. Optimize preparation by receiving hospital team and making treatment faster, safer and more efficient.
4. Annotate the acquired data under 1 to train an algorithm to create transcripts of the interventions and actions taken for a structured and automated handover.
5. Annotate data, and train algorithms that will aid in normal protocol execution and recognising differential diagnostic ‘rule out and rule ins’.
6. Implement developments under 4 and 5, to study reliability, security, safety, clinical and economic effects.

Study objective

Effectivity of information transfer between ambulance personnel and hospital staff (% content using SBAR system)

Efficiency of information transfer between ambulance personnel and hospital staff (time)

Study design

Various time points:
Estimated time of arrival
Time of registration at ED nurse
Time of arrival at ED
Time of teambriefing
Duration of teambriefing
Duration of handover

Time of first treatment
Time transfer to ward/OR
Duration of admission
Location after admission from ED
Locatie van patient na opvang
These time points will be physically collected by a researcher (student) at the ED (emergency department)

Intervention

None

Contacts

Public
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Eligibility criteria

Inclusion criteria

- All ages
- Major trauma cases (ISS>16)
- All resuscitation patients
- Critically ill patients

Exclusion criteria

- Minor trauma cases

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	20-01-2021
Enrollment:	300
Type:	Anticipated

IPD sharing statement

Plan to share IPD: Undecided

Ethics review

Positive opinion

Date:	20-01-2021
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL9237
Other	METC AMC : W20_058 # 20.086

Study results