



Presenta:



**CONGRESO NACIONAL
DE ENFERMERÍA CLÍNICA**

6 Y 7 DE ABRIL · PLAZA MAYOR

MEDELLÍN · COLOMBIA

***Sistemas de Información en el
Soporte a la actividad de la
enfermería***

José F Florez-Arango MD MS PhD

Profesor Investigador:



Miembro:



Secretario ATALACC

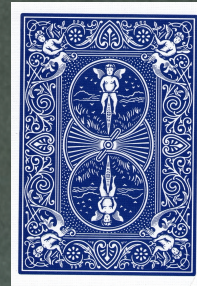


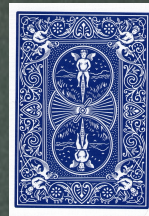
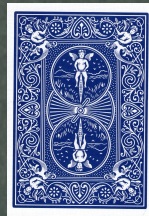
Vocal

Emprendimientos:



























Al año, 180.000 personas que son hospitalizadas mueren a causa de errores médicos

Salud 13 May 2016 - 7:25 PM

Por: Redacción Salud

Así lo establece un estudio de la Universidad de La Sabana, que alerta sobre el riesgo que corren los pacientes por mala administración de los medicamentos o porque les dejen instrumentos quirúrgicos en el cuerpo.



Valorar

interesante	indignante
divertida	polémica
sorprendente	aburrida

Esto es lo que afirma un estudio realizado por investigadores del hospital Johns Hopkins.

Los expertos del centro concluyeron que alrededor de 250 mil personas al año mueren por fallas médicas, lo que supera los fallecimientos por

Informática Biomédica

- Área del conocimiento encargada de estudiar los procesos y los métodos
 - adquisición,
 - representación,
 - almacenamiento,
 - recuperación,
 - consulta,
 - Transformación
 - Transporte
 - Visualización
- Y en general, utilización de **datos, información y conocimiento** generados en el sector salud para el apoyo en la **toma de decisiones y la solución de problemas en salud.**

Jerarquía Conceptual

Informática Biomédica

e-Salud
Teleducación

Telesalud

Informática en
Enfermería

mHealth

Telemedicina

Robótica en
salud

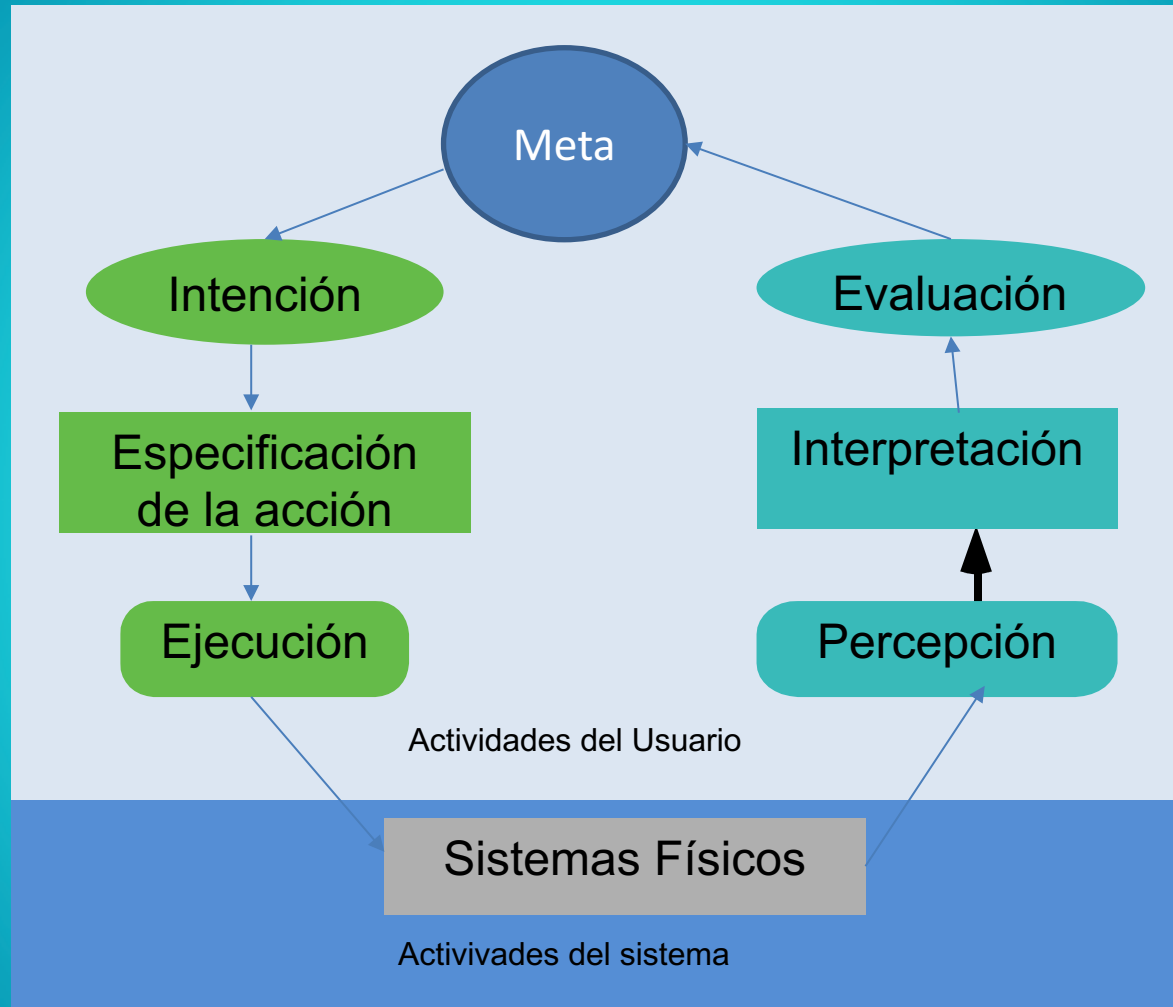
Los Cinco Roles del Médico

Sector Salud

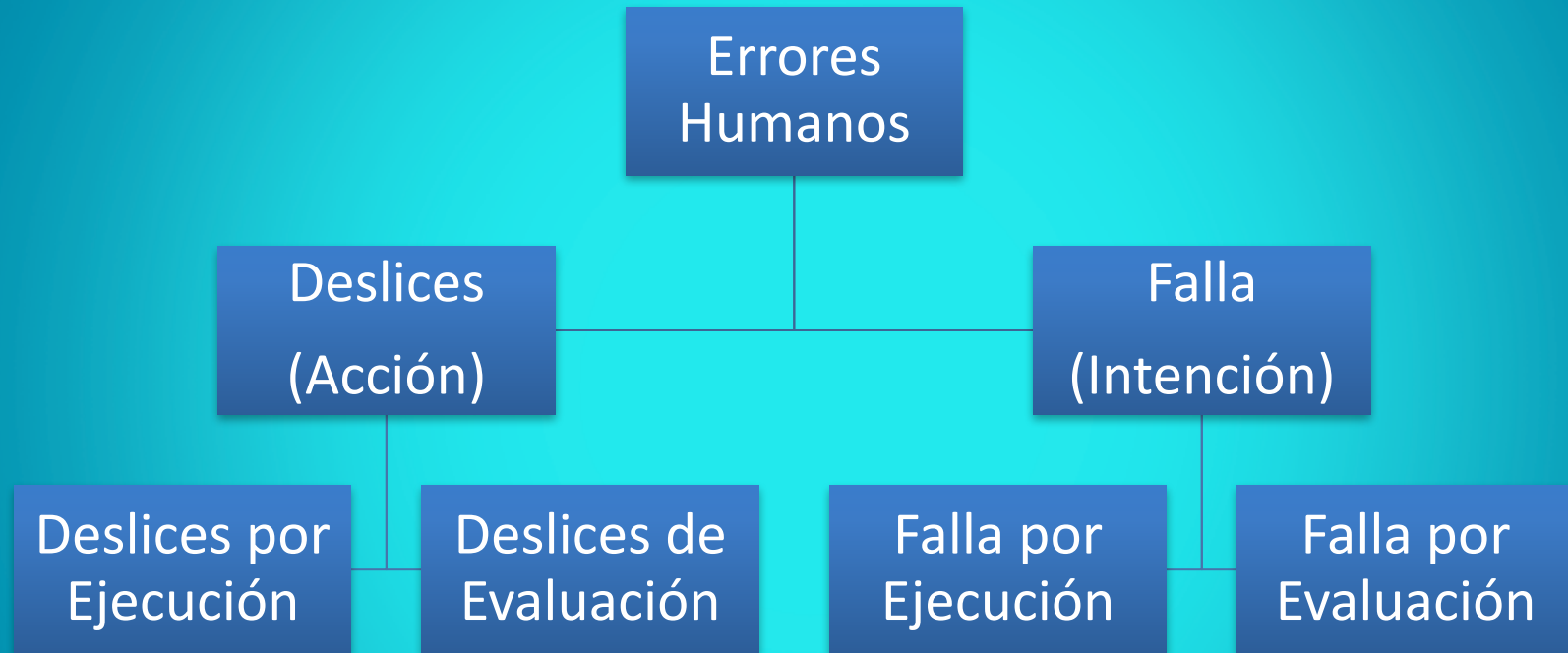
- Clínico
- Educador
- Comunicador
- Estudiante
- Administrador

FRIEDMAN C. Medical School Objectives Project: Medical Informatics Objectives. Medical Advisory Panel. AAMC. 1998

Teoría de Acción de Norman



Jerarquía de los errores



Factores Humanos

- Atención
- Memoria
 - Largo plazo
 - Corto plazo/trabajo
- Presión de tiempo
- Carga física
- Satisfacción con la tarea



Catéter Venoso Central

Catéter Epidural

Tubo de gastrostomía

Cateter IV

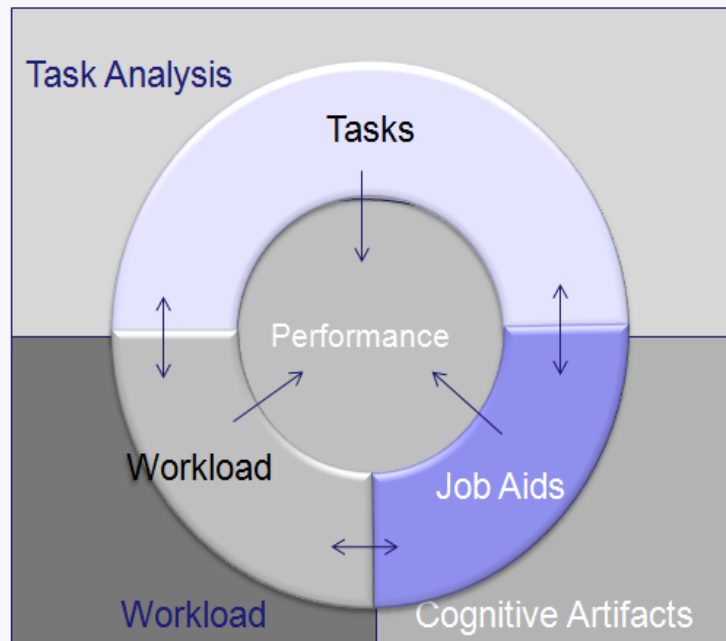


Políticas seguridad paciente

- Identificación correcta
- Comunicación efectiva
- Administración Correcta Medicamentos
- Buenas prácticas procedimientos quirúrgicos
- Reducción de riesgo infección (lavado de manos)
- Riesgo de Caidas
- Dispositivos médicos

Cognitive Sciences

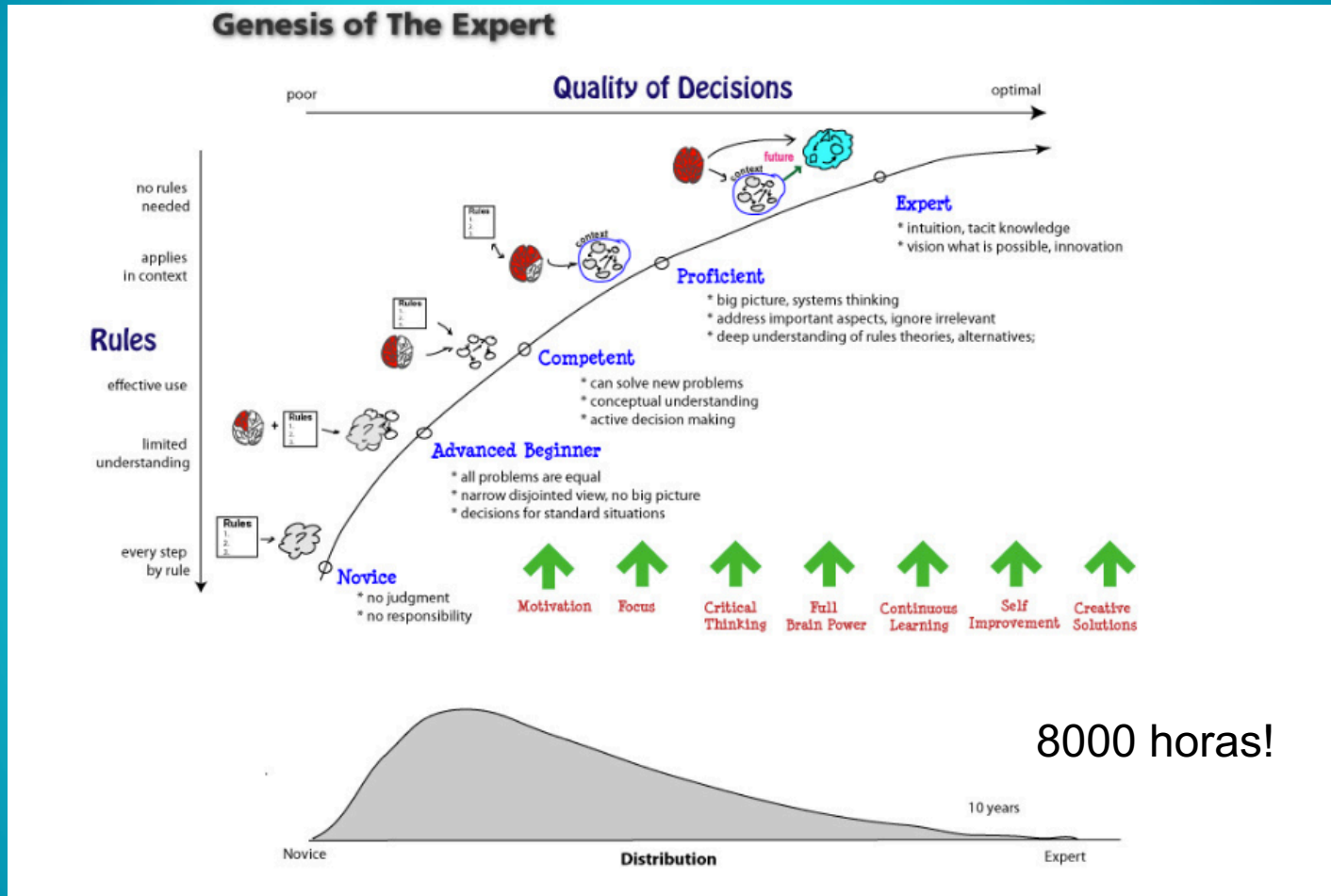
Human Factors



Soporte a la toma de decisiones

- Evidencia + Datos paciente => Sugerencias

Génesis de un Experto



<https://www.swenurse.se/contentassets/65ffb65e2f7d434185f8c66bb972c357/2013/stockholm-may2013-dawn-dowding.pdf>

Sistemas de soporte a la toma de decisiones

Pasivos

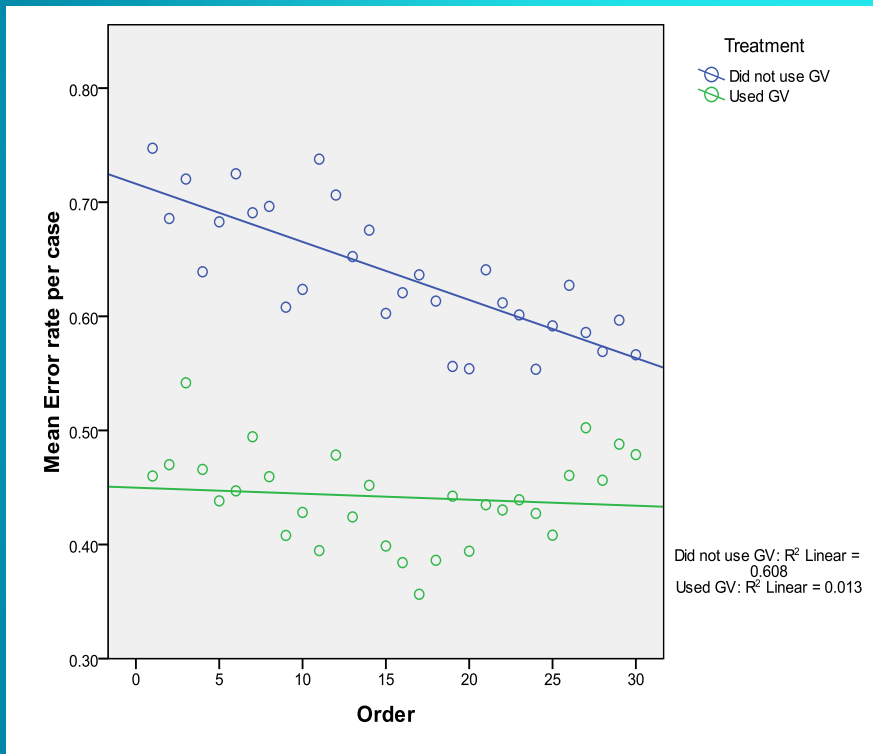
- Invocados
- A demanda
- Alta carga de memoria
- Transcripción de datos
- Asincrónicos

Activos

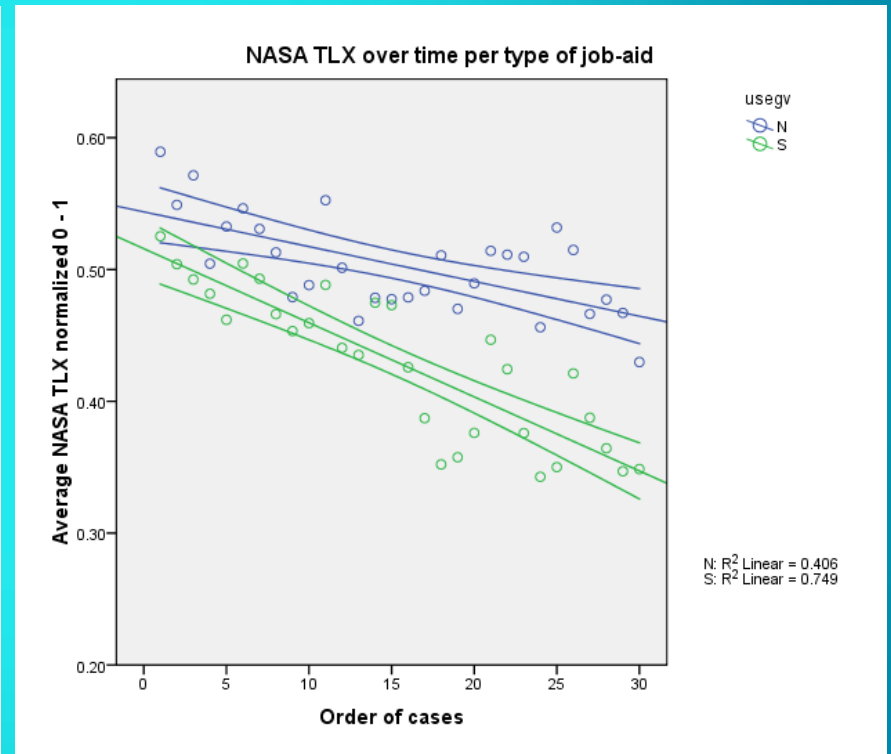
- Desencadenados automáticamente
- Embebidos en el flujo
- Reducción de la memoria
- Aprovechamiento de datos
- Sincrónicos

CHW workload factors with Job Aids (Florez 2009)

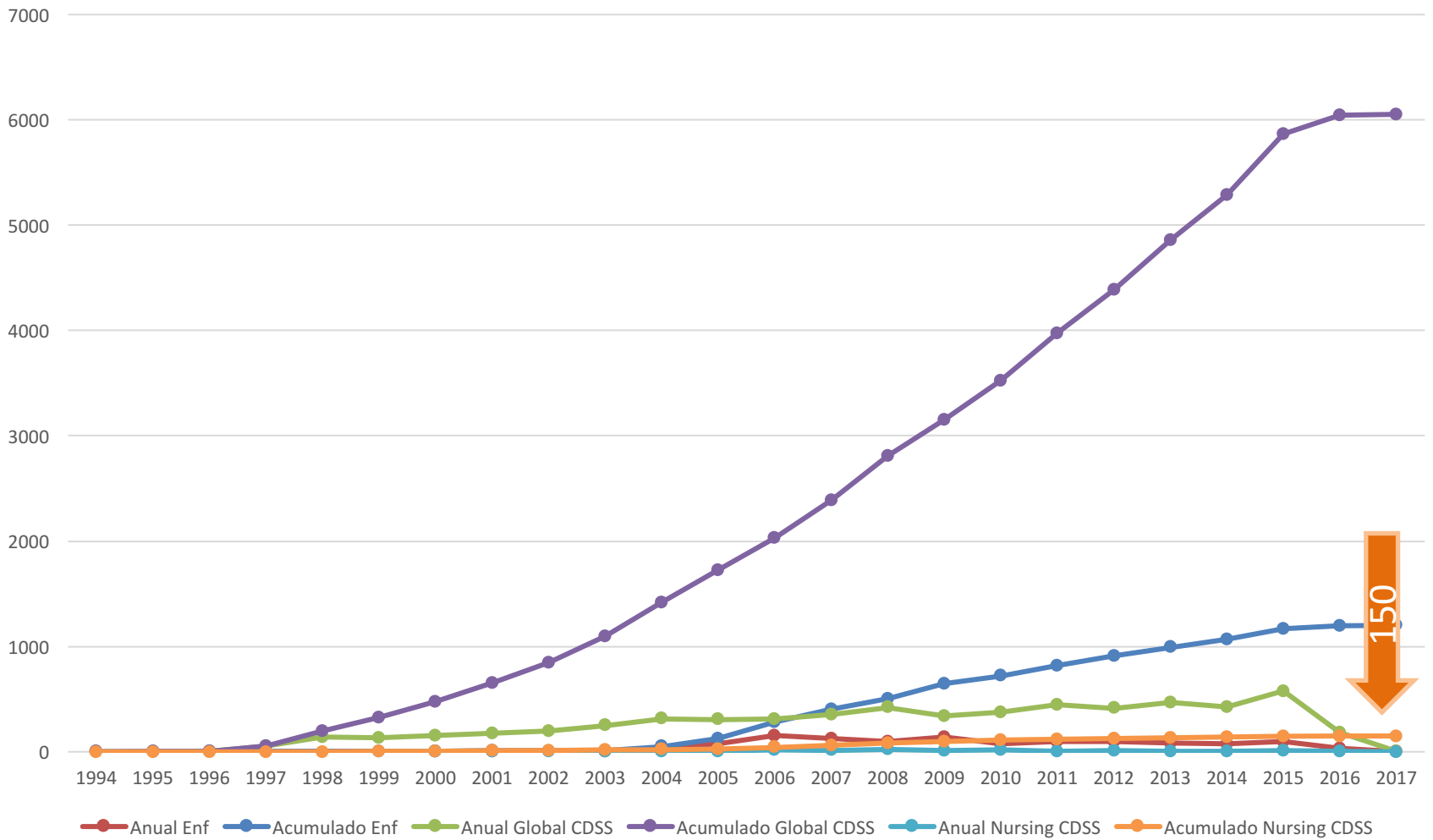
Errores



Carga Laboral



Publicaciones en nursing informatics



Los Cinco Roles del Médico

Sector Salud

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- Educador
- Comunicador
- Estudiante
- Administrador

FRIEDMAN C. Medical School Objectives Project: Medical Informatics Objectives. Medical Advisory Panel. AAMC. 1998

Clinical Decision Support and Perioperative Peripheral Nerve Injury: A Quality Improvement Project.

- [Comput Inform Nurs.](#) 2015 Jun;33(6):238-48; quiz E1. doi: 10.1097/CIN.000000000000148.
- [Bouyer-Ferullo S¹, Androwich IM, Dykes PC.](#)
- [Author information](#)
- **Abstract**
- Decision support at the point of care has been demonstrated to be an effective tool in providing a safe environment and improving patient outcomes. The operating room is typically an area where advanced technology is introduced to nurses on a regular basis. This quality improvement project focused on preventing a peripheral nerve injury, which is an example of a postoperative adverse event that is considered preventable. Injury of a peripheral nerve is the result of compression, hyperextension, flexion, or ischemia surrounding the nerve. The goals for this project were to improve the knowledge of peripheral nerve injury of the operating room nurses, design and implement a peripheral nerve injury assessment screen that could provide decision support within the operating room record, improve the nursing documentation of peripheral nerve injury interventions, and (long term) decrease the incidence of peripheral nerve injury. A decision support screen within the operating room record was designed to supplement the operating room nurse's risk assessment for peripheral nerve injury. The components of this project involved a preliminary and postproject surveys on peripheral nerve injury knowledge, an educational presentation, and a retrospective random review of nursing documentation in the operating room electronic health records. **Project results demonstrated a significant increase in nursing documentation of peripheral nerve injury interventions (63%-92%) and a positive attitude toward their exposure to basic decision support (P = .046).** Recommendations for future studies and establishing a standardized coding system for peripheral nerve injury identification were identified.
- PMID: 25851559 DOI: [10.1097/CIN.000000000000148](#)

The iPad: tablet technology to support nursing and midwifery student learning: an evaluation in practice

- [Comput Inform Nurs.](#) 2015 Mar;33(3):93-8. doi: 10.1097/CIN.000000000000131.
- .
- [Brown J¹, McCrorie P.](#)
- [Author information](#)
- **Abstract**
- This research explored the impact of tablet technology, in the form of Apple iPads, on undergraduate nursing and midwifery students' learning outcomes. In simulated clinical learning environments, first-year nursing students (n = 30) accessed apps and reference materials on iPads. Third-year nursing students (n = 88) referred to clinical guidelines to aid their decision making when problem solving. First-year midwifery students (n = 25) filmed themselves undertaking a skill and then immediately played back the video file. A total of 45 students completed an online questionnaire that allowed for qualitative comments. Students reported finding the use of iPads easy and that iPads provided point-of-care access to resources, ensuring an evidence-based approach to clinical decision making. **iPads reportedly improved student efficiency and time management, while improving their ability to provide patient education.** Students who used iPads for the purpose of formative self-assessment appreciated the immediate feedback and opportunity to develop clinical skills.
- PMID: 25636039 DOI: [10.1097/CIN.000000000000131](#)

Smartphone use to answer clinical questions: a descriptive study of APNs.

- [Med Ref Serv Q.](#) 2015;34(2):135-48. doi: 10.1080/02763869.2015.1019320.
- [Grabowsky A¹.](#)
- [Author information](#)
- **Abstract**
- This study examines the use of smartphones by Alabama Advanced Practice Nurses to find information to address clinical questions and seeks to describe the types of questions answered using smartphones; barriers to information seeking; apps and online resources perceived as most helpful; and training/resource needs. Information collected in this study can be used by libraries that serve nursing students to develop training and resources to assist both nursing students and practicing nurses **to become more efficient and effective information seekers.**
- **KEYWORDS:**
- APNs; Advanced Practice Nurses; information seeking; mobile apps; nurse practitioners; smartphones
- PMID: 25927507 DOI: [10.1080/02763869.2015.1019320](#)

Nursing Software for Emergency Triage (NSET).

- [Stud Health Technol Inform.](#) 2015;216:942.
- [Mandirola Brieux HF¹](#), [Guillen S²](#), [La Rosa F³](#), [Moreno C³](#), [Benitez S⁴](#).
- [Author information](#)
- **Abstract**
- Determining the priority of attention in an Emergency Room (ER) has always been a difficult issue. Priority is determined with a simple triage system as people arrive at the hospital. It is important to establish how long they can wait for treatment. In order to obtain the best assessment of patients' conditions, we built a Nursing Software for Emergency Triage (NSET). The objective of this work was to assess the efficacy of the NSET versus the triage process without any software (TWS). **Results showed that the NSET we built was a substantial help.** With this software, **we decreased significantly:1) the length of the triage system process, 2) the waiting time** of patients in the waiting room, **3) the number of complaints and 4) the number of patients who walk away.** In conclusion, the NSET improves and helps to define more accurately a patient's risk. NSET helps in the emergency department triage.
- PMID: 26262244
-

Los 5 correctos de los SSDC

- Información Correcta
- Las personas Correctas : equipo + paciente
- Canal Correcto
- El Formato Correcto
- El punto del flujo de trabajo Correcto

Lo que hacemos mejor que los computadores

- Problemas no estructurados:
 - Diagnóstico clínico
- Adquisición de nueva información:
 - Filtrado de ruido/señal
- Trabajo físico no rutinario
 - Trabajo de bajas habilidades
 - Trabajo de altas habilidades
- Ser humanos!

LEVY, F; Murnane, R. Dancing with robots. Human Skills for computerized work

Qué nos hace humanos?

- Expresión de empatía
- Hacer sentir bien al otro
- Cuidar al otro
- Preocuparse por el otro
- Ser creativo
- Expresar emociones
- Sentirse vulnerable

<https://www.fastcompany.com/3014448/the-four-things-people-can-still-do-better-than-computers>



Search ID: ear0576

"I DON'T GIVE A DAMN WHAT THE CHART SAYS!
I DID NOT HAVE A HYSTERECTOMY!!!"

A manera de resumen

- Somos humanos
- Somos limitados
- Cometemos errores
- Necesitamos de apoyar la tarea
- Los sistemas de información están para ayudarnos y complementarnos
- TODO por hacer

Contacto

- florezarango@medicine.tamhsc.edu
- Skype: josefflo
- Twitter: @josefflo
- Linked In: 37705117

