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Poster Presentations

Scorpion Sting Management Practices in Omani Tertiary Care Emergency Departments: *A retrospective study and survey*

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Objectives: This study aimed to review scorpion sting (SS) management practices in Omani tertiary care emergency departments. **Methods:** This retrospective study included all emergency SS cases at three tertiary hospitals in Muscat, Oman, between March 2016 and July 2017. In addition, emergency physicians were surveyed to determine common SS management practices. **Results:** There were 128 SS cases. Localised pain was observed in 97.7% of patients, swelling in 14.8% and localised redness in 7%. Some patients (13.3%) had systemic symptoms, with tachycardia being most common. Bedside clotting tests were ordered for 11.7% of patients. The most common form of treatment was local anaesthesia (54.7%). None of the patients received antivenom. The survey was completed by 80 emergency physicians with experience in SS management. Analgesia was the main form of management (88.8%), followed by local anaesthesia (81.3%). Most doctors (80%) believed that local anaesthesia was the most effective form of treatment. Only 32.5% reported that they would order a bedside clotting test, of which 69.2% were junior doctors. **Conclusion:** Analgesia was the main form of management, followed by local anaesthesia. Few doctors ordered bedside clotting tests.

Comparison Between the Analgesic Effects of Nefopam versus Tramadol for Postoperative Pain Following a Laparoscopic Cholecystectomy

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Objectives: Pain is a common postoperative complication depending on the type, technique and duration of the surgery. This study aimed to evaluate the effect of nefopam versus tramadol as analgesics among post-laparoscopic cholecystectomy patients. **Methods:** This prospective cross-sectional study was conducted between January and April 2017 at Al Safeer Hospital, Karbala, Iraq. A total of 61 elective laparoscopic cholecystectomy patients were divided into two groups. The first group (n = 29) received 1 mg/kg of tramadol while the second group (n = 32) received 20 mg of nefopam intravenously. Both groups received 1 g of acetaminophen. All patients were observed over the following 24 hours and monitored for pain at zero, one, two, four, eight and 16 hours. **Results:** The first group demonstrated more postoperative pain as compared to the second group, often requiring rescue doses of tramadol. In contrast, rescue doses of nefopam were not required in the second group. **Conclusion:** A single dose of nefopam is more effective than tramadol for postoperative pain following a laparoscopic cholecystectomy.

Chest Trauma Cases in a Tertiary Hospital: *Aetiology, patterns, management approaches and correlations with poor sequelae*

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Objectives: This study aimed to determine patterns of chest trauma and associated factors related to poor outcomes in a tertiary hospital. **Methods:** This retrospective cross-sectional study was conducted from January 2010 to December 2016 at the King Saud University Hospital, Riyadh, Saudi Arabia. **Results:** A total of 235 chest trauma cases were reviewed. The mean age was 32.4 ± 14.5 years and 87.7% were male. The most common causes of chest trauma were blunt trauma (95.7%) and traffic crashes (87.2%). Fractured ribs were most common (63.8%), followed by lung contusions (59.1%), pneumothorax (57%) and haemothorax (34.5%). Many patients had extrathoracic injuries (81.3%). Overall, 55.3% of patients were intubated and ventilated and 48.9% underwent chest tube insertion. Emergency thoracotomies were performed in 8.1%, either due to haemothorax or laceration of the lungs. Poor outcomes were significantly correlated with length of hospital stay, intubation, extrathoracic injuries, blood transfusions, chest tube insertion, lung contusions, tracheostomies and flail chest ($P < 0.050$ each). **Conclusion:** Most chest trauma cases were due to blunt trauma and road traffic crashes. Various factors were significantly correlated with poor outcomes, such as intubation, chest tube insertion and the presence of lung contusions.

Transoral Endoscopic Thyroidectomy Vestibular Approach: *The first 10 cases in Iraq*

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Objectives: A transoral endoscopic thyroidectomy vestibular approach (TOETVA) is a novel noninvasive type of endoscopic surgery using a natural orifice. This study aimed to review the first 10 TOETVA cases reported in Iraq. **Methods:** This prospective study included all 10 TOETVA procedures performed in Iraq from August to December 2017. **Results:** All of the procedures were performed using three laparoscopic ports inserted at the oral vestibule. Of the 10 cases, one had bilateral benign thyroid pathology, while the others had right-sided benign thyroid pathology. All of the patients were female, 24–40 years old and had body mass indexes between 20–26 kg/m². The patient with bilateral benign thyroid pathology underwent a near-total thyroidectomy, while the others underwent lobectomies. The duration of operating time ranged from 90–150 minutes, drain removal from 20–24 hours (with 15–25 mL of fluid drained) and hospital stay from 33–47 hours. The final histopathological results were benign in all cases. Only one complication was recorded, with a patient developing mild cervical emphysema which resolved within 24 hours. There were no deaths and none of the cases required an open thyroidectomy. **Conclusion:** A TOETVA is a safe and feasible procedure; however, it requires longer operating times compared to a conventional open thyroidectomy.

Paediatric Cardiopulmonary Resuscitation: *Comparison between emergency department and inpatient settings at a tertiary academic hospital in Oman*

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Objectives: This study aimed to compare paediatric cardiopulmonary resuscitation (CPR) cases seen in emergency department (ED) and inpatient settings. **Methods:** This retrospective cohort study took place at the Sultan Qaboos University Hospital, Muscat, Oman, and included all paediatric CPR cases occurring between January 2012 and August 2017. **Results:** A total of 83 paediatric CPR cases were reviewed, of which 57.8% were male. In total, 67.5% were inpatients and 32.5% were ED cases. CPR was initiated due to either respiratory arrest (73.5%) or cardiac arrest (26.5%). Almost half of the patients (49.3%) were under one year old. Bradycardia with hypoperfusion was the predominant cause of arrest (65.1%), followed by *asystole* (31.3%). Overall, 51.9% of ED patients were previously healthy, while 78% of inpatients had a history of chronic disease. Only 9.6% of patients survived to discharge. Among cases of brain death/mortality, 87.5% were ED cases and 92.6% were inpatients. Although 24-hour (18.5%) and one-year (11.1%) survival rates were higher among ED cases, this difference was not significant. **Conclusion:** Paediatric CPR was most commonly performed due to respiratory arrest. Most arrests were due to bradycardia with hypoperfusion. Very few patients survived to discharge. Despite significant differences in clinical variables, CPR outcomes in ED and inpatient settings were similar.

Perceptions of Nursing Managers Regarding the Nursing Working Environment at the Sultan Qaboos University Hospital

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Objectives: Nursing is a physically demanding profession with long working hours and heavy workloads; moreover, in some regions there may be a lack of funds for necessary training and development. Such working conditions can be attributed to poor management practices and may negatively affect nurses' job satisfaction, performance and patient outcomes. This study aimed to identify perceptions of the nursing work environment at a tertiary hospital. **Methods:** This cross-sectional study was conducted at the Sultan Qaboos University Hospital (SQUH), Muscat, Oman. Questionnaires were distributed to nursing managers/administrators. The questionnaire surveyed various dimensions of a working environment, including organisational support, leadership, managerial practices, communication, professionalism, interpersonal relationships, resources, autonomy and workload. **Results:** Nursing leaders/managers had very high perceptions of leadership ability and autonomy at SQUH. However, other factors, especially professional development, workload and resource availability, were identified as requiring further improvement. **Conclusion:** An action plan is recommended to help nursing leaders/managers at SQUH to enhance the nursing working environment. Further research is recommended to assess the nursing work environment from the perspective of staff nurses.

Healthcare Workers' Attitudes Towards Individuals with Malingering Phenomenon at the Department of Behavioural Medicine, Sultan Qaboos University Hospital

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Objectives: Malingering phenomenon (MP) is the fabrication of illness symptoms for various motives, such as avoiding school/work, obtaining drugs or to attract sympathy. This study aimed to establish healthcare providers' attitudes towards individuals with MP. **Methods:** This cross-sectional study was conducted in the Department of Behavioural Medicine, Sultan Qaboos University Hospital, Muscat, Oman. An existing tool to assess attitudes towards patients with borderline personality disorder was modified to assess attitudes towards MP. **Results:** A total of 40 healthcare workers participated in the study. Most (89%) believed that emotional/psychological problems were contributing factors in MP development, with few (18.9%) believing that socioeconomic status played a role. Females reported greater difficulty dealing with malingerers than males (82.6% versus 64%); however, there was little difference between doctors and nurses (70% versus 68.7%). When dealing with malingerers, females reported feeling more helpless and often manipulated compared to males (17.3% versus 7% and 26% versus 7%, respectively). Additionally, more males than females believed that malingerers could be cured (92.8% versus 43.4%). However, males more often felt provoked by malingering behaviour compared to females (28% versus 21%). **Conclusion:** Female healthcare workers had greater difficulty tolerating malingerers and felt more helpless when dealing with them, often losing their temper. Although male healthcare workers felt more provoked by malingering behaviour, they felt less discomfort/annoyance compared to their female colleagues.

Tracheal Tear in a Child with a Bicycle Handlebar Injury: *A complex resuscitation scenario*

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We report an 11-year-old male who presented to the Emergency Department of the Sultan Qaboos University Hospital, Muscat, Oman, with swelling and pain after a bicycle handlebar injury to the left side of the neck. An initial examination was unremarkable; however, a secondary examination revealed oedema in both supraclavicular areas, although more so on the left side of the neck. The swellings were soft upon palpation, with evidence of *crepitus*. Subsequently, there was a progressive increase in the right-sided oedema, resulting in dyspnoea and hoarseness. In light of imminent airway compromise, the patient was intubated using a portable videolaryngoscope. A chest radiograph revealed left apical pneumothorax and pneumomediastinum. Computed tomography showed a large bilateral pneumomediastinum with extensive surgical emphysema over the anterior chest wall, neck and the left side of the face. A bronchoscopy revealed a small longitudinal tear in the posterior membranous wall at the mid-tracheal level. The patient was managed conservatively, kept intubated for seven days and was discharged after an uneventful recovery.

Headscarf Pin in the Right Main Bronchus: *Habits need to be changed*

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We report a 25-year-old female who presented at the Emergency Medicine Department of the Sultan Qaboos University Hospital, Muscat, Oman, after having accidentally inhaled a headscarf pin. A chest radiograph showed a metal pin lodged in the right main bronchus of the lung. The pin was immediately removed via fiberoptic bronchoscopy. The patient was discharged the next day, after an uneventful overnight stay in the hospital.

Emergency Balloon Atrial Septotomy

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A balloon atrial septotomy (BAS) is a technique for dilating atrial septal defects without the need for a thoracotomy or general anaesthesia. We report a 4-day-old neonate who was referred to the Ibn Albitar Cardiac Center, Baghdad, Iraq, with d-transposition of the great arteries and an atrial septal aneurysm (ASA). The ASA had a small shunt across it. There were no ventricular septal defects or patent *ductus arteriosus*. Upon examination, the patient was deeply cyanosed and in respiratory distress. An emergency BAS procedure was performed, in which a 6Fr Rashkind balloon catheter was introduced from the right femoral vein, advanced through the right atrium and, subsequently, into the left atrium. The balloon was inflated with 2–3 mL of diluted contrast medium (20:80%). Fluoroscopy and echocardiography were used to position the balloon. The inflated balloon was then rapidly passed into the right atrium where it immediately deflated. This process was repeated three times until peripheral capillary oxygen saturation had increased from 58% to 81%, with equalisation of pressure between the atria and free flapping of the *ostium primum* on echocardiography.