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Apple Enterprise Now By Tom Kaneshige

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iPad At Work: A Life Saver?

Lee Medical hopes its iPad app can lessen the risk of the leading preventable cause of death in hospitals.

Posted September 30, 2011 to [Tablet PCs](#) | [Add a comment](#)

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In April, an infection entered my bloodstream leading to near-organ failure in the emergency room. Over the next four months, I had a tube, or line, sticking into my arm and traveling toward my heart so that I could take antibiotics intravenously. A bad skin rash from the adhesive dressing developed around the insertion point.

Needless to say, tapping a vein near the heart is serious business.

Blood infections have a 25 to 30 percent mortality rate in this country, as in one out of four patients won't see another sunrise. It is the leading preventable cause of death in hospitals.

Sometimes such infections occur when an intravenous line is put in for other reasons or when a line is cared for without a proper sterile field or sterile equipment. A skin rash can also become infected, with the deadly stuff getting into the bloodstream via the insertion point.



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Now a small intravenous nurse specialist firm, Lee Medical, hopes iPads can help nurses do a better job managing the lifecycle of the intravenous line, as well as a patient's reactions to different dressings. A dozen Lee Medical nurses carry 3G iPad 2s to hospitals. They depend largely on an iPad app Lee Medical developed on the Filemaker Go platform, called VAST, or vascular access surveillance and tracking.

The iPad 2's ease of use means nurses make fewer mistakes when inputting data, which include pictures of the insertion site at various stages taken with the built-in camera. VAST tracks some 1,400 data points. The mobility of the iPad lets nurses traveling anywhere in the country input data at the point of care. This lessens the odds that data will be accidentally left out during the inputting process hours later.

Slideshow: [15 Ways iPad Goes to Work](#)

Given the sensitivity and security around patient information, Lee Medical's iPads are specially configured. Nurses can't use them to play Angry Birds, log their location on Foursquare, check personal emails. No patient information is stored locally. Data transfers go through a virtual private network.

But the iPad isn't foolproof.

It's true that hospitals have become early iPad adopters for their own staff. Texas Health Resources, a healthcare provider with 24 hospitals, has found that [iPads let clinicians spend more time with patients](#). But hospitals are wary of traveling nurses and third-party iPad apps hooking into their legacy systems. Lee Medical has run into political snags trying to get VAST to electronically transfer patient data with hospitals, although a pilot project is underway.

This means Lee Medical has to rely on highly inefficient and antiquated technology, namely the fax machine. After inputting data into VAST on the iPad, Lee Medical nurses must tap a button that sends patient reports to the hospital's fax machine. Presumably, someone picks up the fax and inputs the data into the hospital's system.

During my ordeal, I was going to the hospital's infusion center to get my dressing changed every week. As my rash worsened, my dressing had to be changed every couple of days. The nurses there tried a half-dozen different types of dressings and cleaning agents, in hopes of finding a combination that didn't irritate my skin.

The most maddening part, though, was that a nurse would begin cleaning and putting on a dressing that another nurse had already tried. I finally had to take pictures with my iPhone of the various dressing packages in order to show nurses which ones didn't work.

My thought: Why was the patient the only one tracking this?

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