

Through CHART Institute's partnership with The Sullivan Group, four courses are available at no charge to nurses, physicians, and advanced practice providers who provide care at CHART member hospitals. The CME/CNE courses are case-based and developed by practitioners for practitioners. Four bundle options are available with one bundle assigned to each member hospital.

### **Bundle 1 (8 CME / 5.4 CNE available)**

- Cognitive Errors in Medicine Part 1
- Death After Discharge
- Handoffs, Transitions & Discharges: Key Moments in Patient Care
- Psychiatric Patients: Evaluation of the Suicidal Patient

### **Bundle 2 (8 CME / 4.6 CNE available)**

- Atypical Presentations of Acute Coronary Syndrome in Women
- Handoffs, Transitions & Discharges: Key Moments in Patient Care
- Psychiatric Patients: Medical Evaluation
- Stroke #1: Diagnostic Error and Risk Reduction

### **Bundle 3 (8.5 CME / 5.8 CNE available)**

- Prevention and Reduction of Maternal & Neonatal Morbidity & Mortality - Obstetrics
- Psychiatric Patients: Evaluation of the Suicidal Patient
- Risk & Safety Overview in Emergency Medicine, Part 2
- Trauma: Alcohol Intoxication

### **Bundle 4 (6.5 CME / 4.9 CNE available)**

- Cognitive Errors in Medicine Part 1
- FHM Vignette #12: Clinical Management Problem I
- Handoffs, Transitions & Discharges: Key Moments in Patient Care
- Shoulder Dystocia

To access the courses, email the following information to [chartinstitute@chartrrg.com](mailto:chartinstitute@chartrrg.com):  
First and Last Name, Hospital, Position and Email Address.

These courses are available April 1, 2024 through March 31, 2025.

For more information contact CHART Institute, [chartinstitute@chartrrg.com](mailto:chartinstitute@chartrrg.com) or 412-212-3338.

## **Atypical Presentations of Acute Coronary Syndrome in Women**

**2.0 CME / 1.2 CNE**

This course reviews gender differences in the presentation of Acute Coronary Syndrome (ACS), looks at the unique symptoms of ACS in women, and examines cognitive errors that contribute to diagnostic errors in the evaluation of women with ACS.

## **Cognitive Errors in Medicine Part 1**

**2.0 CME / 1.2 CNE**

This course examines how thought processes influence decision-making, affect patient care, and contribute to medical mistakes. It introduces six types of cognitive errors and discusses real case examples to illustrate how cognitive errors contributed to delayed or missed diagnoses.

## **Death After Discharge**

**2.0 CME / 1.6 CNE**

This course presents various cases and employs tools, including medical-legal analysis and the cognitive autopsy, to dissect the issues that led to the patient's death. In addition, each case presentation is scrutinized for clues in the history, risk factors, physical exam, diagnostic data, and medical decision-making that were missed by the physicians and should have caused them to stop and reconsider their plan to discharge the patient.

## **FHM Vignette #12: Clinical Management Problem I**

**1.0 CME / 1.0 CNE**

This course reviews fetal heart rate patterns and highlights useful information for practitioners who interpret fetal tracings.

## **Handoffs, Transitions and Discharges:**

### **Key Moments in Patient Care**

**2.0 CME / 1.2 CNE**

This course outlines communication and process related challenges associated with healthcare handoffs, transitions, and discharges, and provides strategies and techniques to help improve communication, decrease patient risk, and reduce liability, risk, and costs.

## **Prevention and Reduction of Maternal & Neonatal Morbidity & Mortality – Obstetrics**

**1.5 CME / 1.3 CNE**

This course describes steps to take to reduce maternal and fetal morbidity and mortality in labor and delivery by implementing evidenced-based recommendations from The Council on Patient Safety in Women's Health Care and California Maternal Quality Care Collaborative. The recommendations include steps organizations and providers can take to reduce primary cesarean sections by implementing evidence-based practices for operative delivery, inductions, management of fetal malpresentation.

## **Psychiatric Patients: Evaluation of the Suicidal Patient**

**2.0 CME / 1.4 CNE**

This course focuses on the emergency evaluation of the suicidal patient. It defines the challenges and arms practitioners with tools to identify and evaluate these patients. Actual case studies are presented to illustrate key principles of caring for suicidal patients.

## **Psychiatric Patients: The Medical Evaluation**

**2.0 CME / 1.2 CNE**

This course presents evidence-based medical and legal literature and cases related to the incidence and etiology of mental illness, the overlap of medical with psychiatric illness, the medical clearance process, delirium and dementia, documentation, and cognitive errors in psychiatric diagnosis.

## **Risk and Safety Overview in Emergency Medicine Part 2**

**3.0 CME / 2.0 CNE**

This course introduces the key concepts of patient safety, risk mitigation, and error reduction and provides an overview as to how these concepts apply to the most commonly encountered high-risk clinical entities.

## **Shoulder Dystocia – Obstetrics**

**1.5 CME / 1.5 CNE**

This course provides an overview of Shoulder Dystocia including: the definition, protocols, risk factors, injuries, causes, prevention, management and the importance of documentation.

## **Stroke #1: Diagnostic Error and Risk Reduction**

**2.0 CME / 1.0 CNE**

This course explores the most common reasons the diagnosis of stroke is missed, delayed, or inappropriately managed, as well as the common medical errors and allegations of malpractice; it also provides risk and documentation guidelines. Additionally, it presents and discusses cases related to the atypical stroke/TIA presentation, which is difficult and sometimes impossible to diagnose, and the failure to diagnose stroke.

## **Trauma: Alcohol Intoxication**

**2.0 CME / 1.1 CNE**

This course presents and discusses cases to help illustrate key principles as well as the common errors made during the evaluation and management of intoxicated patients. It will assist emergency practitioners in acting confidently and competently in providing optimal patient care, protecting the patient against the risk of injury, and avoiding subsequent litigation.