Preface

Resuscitation in Emergency Medicine: Now More Important than Ever







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Resuscitation has long been a cornerstone of emergency medicine. Whether it is caring for the patient with cardiac arrest, acute respiratory distress, multisystem trauma, or undifferentiated shock, the emergency physician must be an expert at resuscitation. For many critically ill patients, it is the crucial initial hours of illness, when the patient is in the emergency department (ED), when lives can be saved. With our collective goal of saving lives, we have focused this issue of Emergency Medicine Clinics of North America on the resuscitation of our sickest ED patients. This issue begins with an outstanding article on how to best prepare yourself, and your team, for a successful resuscitation. The remaining articles provide critical resuscitation pearls on important topics that include cardiac arrest, post-cardiac arrest care, fluid resuscitation, sepsis, emergency transfusions, toxicologic emergencies, gastrointestinal hemorrhage, the crashing pregnant patient, and the initiation of extracorporeal membrane oxygenation in the ED. Written by experts in emergency medicine resuscitation, the articles in this issue provide the latest, evidence-based approaches to commonly encountered critical conditions. Quite simply, we feel this issue will help the emergency physician save lives!

As we completed the publication of this issue, we witnessed the unfolding of one of the greatest public health challenges and tragedies of the last century: the COVID-19 pandemic. Since this pandemic hit, starting in late February of 2020, Emergency Medicine has taken a strong leadership role within the health care system. Emergency physicians have not only provided outstanding clinical care in their EDs but also provided operational expertise as leaders within organizations locally, regionally, and nationally. Emergency physicians have been offering clinical innovations, authoring research papers, and leading national conversations around resuscitation of

patients with COVID-19. This public health emergency has led to a deluge of critically ill patients in many EDs, with emergency clinicians now being called upon to resuscitate and manage critically ill patients at a much higher volume and for even longer periods of time than baseline.

Importantly, the articles in this issue were written and edited prior to this pandemic. However, increased experience with caring for patients with COVID-19 has shown us that the fundamentals of resuscitation and critical care still apply. As such, the approaches outlined in these articles provide an excellent foundation for taking care of all critically ill and injured patients in the ED, with COVID-19 or otherwise. For example, articles on fluid resuscitation, sepsis management, and the crashing obese patient are applicable to patients with COVID-19.

As we as a specialty look to move beyond this pandemic, returning to caring for our broad ED population is essential. As our patients return to the ED for customary care, it is essential that we as a specialty provide the most up-to-date evidence-based approaches. For the emergency physician, expertise in resuscitation may be more important now than ever.

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