

# The Quarterly

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*“It is not merely a company; it is indeed a phenomenon being led with a lot of passion towards improving patients”*

## Employee Spotlight

### Meet Arooj Fatima



**Arooj has been part of HDmedical since the early stages of the company, serving as Remote Mobility Coach as well as liaison for the Freedom Trial at Johns Hopkins. In addition to her work at Hdmedical, Arooj is a physician with extensive experience running critical care and oncological research trials. She has more than 8 years of experience with inpatient critical care studies, including a year of handling complicated oncological therapeutic outpatient research protocols.**

**Outside of work, Arooj is completing, on a part-time basis, a Master of Public Health degree at Harvard’s T Chan School of Public Health. Whenever she manages to find free time, she loves spending time with her 8-year-old, going out for hikes, and enjoying fine dining.**

**Arooj got involved with HDmedical because she sees the company as a significant public health initiative led by a great team of highly skilled folks passionate about improving the quality of life for patients and their families. She says she feels lucky to be a small part of this wonderful team, and we feel lucky to have her!**

## Did You Know?

### Delirium Affects Children Too!



“The same condition that can derail a normal life in adults can alter the course of a child’s life permanently.”



The effects of restraint and over-sedation on adult patients have been well researched and reported for decades, but only in recent years has a similar understanding developed for pediatric patients. The anecdotes of adult patients who have experienced delirium have led to focused investigation into the condition, while the stories from children were often treated as “bad dreams” or the result of a child’s “over-active imagination.” Thankfully, much has changed in that regard over the past several years, and we now know that pediatric delirium, in addition to all of the difficulties seen in adult delirium, can also result in significant negative outcomes specific to young patients. For example, numerous studies have shown that pediatric delirium can lead to significant developmental problems including difficulty in speech development and IQ, as well as stunted emotional development. In short, the same condition that can derail a normal life in adults can alter the course of a child’s life permanently.

Because children are less resilient emotionally, and consequently less predictable in their behavior, it is often the actions of well-meaning caregivers who restrain and sedate them that creates a serious condition that is typically not diagnosed until after the child leaves the hospital. Without adequate tools to assess and characterize the cognitive state of the child in the hospital, caregivers for years have been “flying blind” when treating pediatric patients who require the same life-saving lines and tubes as are needed for critically ill adults. The evaluation methods used for adults, the Confusion Assessment Method (CAM ICU) and the Richmond Agitation-Sedation Score (RASS) are not effective for younger children. Thankfully, Dr. Chani Traube and her team at Cornell University developed the Cornell Assessment for Pediatric Delirium, or CAPD, which specifically addresses the different requirements for assessing children. Armed with this tool, caregivers have a method to prevent and reduce the effects of delirium.

Now that we can identify and characterize the symptoms and likelihood of delirium in children, how do we eliminate this devastating illness in our pediatric population? They still face the same risks as adults when left unattended, and the majority of caregivers are still inexperienced in their understanding of how to treat children at risk for delirium. HD Medical is leading the charge in this area, with solutions targeted to the pediatric population. The Exersides® Refrains® is designed to be applicable to older children and adolescents, and we’re developing a pediatric version of the Refrains for younger children. In addition, our revolutionary DelTrain™ VR immersive education has added a pediatric product to the portfolio which is the only educational tool that combines an authentic simulation of what it is to be a child with delirium with training on the latest best practices for treating at risk children and correctly executing a CAPD assessment. Learn more at [HDMedical.org](http://HDMedical.org)!

## A Message from C4 (Chief Culture Change Catalyst)

### Nursing (and Niceness) Shortage



I'm sure by now we are all aware of the nursing shortage. Let's examine some important factors and consequences.

I guess we can figure out that many older nurses retired during the pandemic and that some younger nurses went on to less risky areas (Thank you to those who stayed!) but were you aware that nursing schools are turning away potential students? While shocking, the reason is actually borne of the same origin – a lack of nurses to teach them. Wow. Another factor is the migration of nurses from one employer to another for large sign-on bonuses, and to temp agencies for significantly higher wages

(pretty hard to resist!). So medical institutions are hiring nurses from other institutions and companies, we don't get any more nurses out of the equation, and costs skyrocket. Wow, again. I think the only thing worse than the failing medical staff logistics are the dire consequences. A great many patients cannot get an appointment until it is too late causing prolonged or increased pain, irreparable worsening of their condition, and of course, the distinct feeling that we have become an uncaring society.

Have you noticed that when you walk into some lobbies and offices that you are warned by signage not to misbehave? Our service structure has shifted the balance from that of customer-value to that of employee-value. Understandable coming from an era of 'The customer is always right (even when they are hostile)' but should we be making such a drastic shift to a 'The employee is always right' focus? People want to 'work' from home, and many don't seem to mind under-employment. We have become used to long waits, IT not working, circuitous phone tree algorithms, and service people who spout policies and how sorry they are for any inconvenience caused. The message seems to be coming through that patients are not the focus, and they'd better not complain about it too much or they will be ignored altogether, and that mediocrity and conformity are better than friendly competition and excellence.

The good news? We seem to be emerging from this dark time and both patients and caregivers are getting GENUINELY nicer again!

I don't have all (or even most) of the answers, but it seems like the roots behind this shift in priorities away from patient/family focus developed at the same time as so many great societal improvements – like staying away from negative language, giving voice to historically under-represented factions, and placing emphasis on caring for the planet. What's a modern girl to do? Well, let's remember to treat people the way we would want to be treated; do a little extra for people in need, refrain from hiding behind empty policies, and encourage work ethic. I guess it might be a good idea to examine what we have become, keep the good/discard the bad, and figure out how we got to this place so we can improve things for next generations of patients and caregivers (like we're supposed to). Let's start with protecting the excellence of our healthcare system and remember that employees may someday become patients.

Yours truly,

Marie Pavini MD

### A Few Good Mentions

April 8-11: AONL 2024 New Orleans, LA [www.aonl.org/conference](http://www.aonl.org/conference)

April 9-10: AACN Horizons Portland, ME <https://aacnhorizons.nursingnetwork.com>

April 14-16: EarlyMobility.com Orlando, FL. [www.earlymobility.com](http://www.earlymobility.com)

“were you aware that nursing schools are turning away potential students?”

## In the News



### HD Medical Awarded Vermont and New England Manufacturer of the Year!

“...HD Medical’s spirit of innovation and unique story as a leader in culture change for a key segment of healthcare has struck a chord in the small business community.”

As part of **National Small Business Week**, The U.S. Small Business Administration has awarded HD Medical the honor of **2024 VT Small Business Manufacturer of the year**. This alone is a tremendous honor, but HD Medical also has been honored as **New England Regional Small Business Manufacturer of the Year for 2024**. Hundreds of companies in the New England region were considered for this award, which includes Massachusetts, Maine, Vermont, and New Hampshire, but HD Medical’s spirit of innovation and unique story as a leader in culture change for a key segment of healthcare has struck a chord in the small business community. HD Medical will be officially recognized at an awards ceremony on June 12 in Burlington, VT.

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“... where common sense  
meets healthcare...”

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[HDmedical.org](http://HDmedical.org)

## Home In Vermont



Spring in Vermont means three things: the end of snow season, lots of mud, and maple syrup. Take a quick trip through almost any part of the state and you’re bound to see trees with sap lines or buckets, smoke billowing from a sugar house, and at least one maple festival. You’ll also see grass, trees and flowers coming back to life. Spring brings plenty to celebrate, no matter which part excites you most!