CBC Marketplace recently aired an episode on automated external defibrillators (AEDs) – combining facts regarding their potential life-saving benefits with some disturbing findings regarding their accessibility to the public. As Iridia’s business was built on the need which our Founder, Dr. Allan Holmes, had identified to make AEDs more widely accessible, this issue is near to our hearts. However, to fully understand the reasons why having AEDs readily available is so important, it is necessary to understand some of the facts regarding sudden cardiac arrest (SCA).

**SCA Facts**
Up to 40,000 cardiac arrests occur each year in Canada alone. Without rapid treatment, particularly a shock delivered by an AED, most of these cardiac arrests will result in death. On average, every 1 minute delay in defibrillation will reduce survival rates by 7% to 10%. Simple math suggests that after a 10 minute delay in defibrillation, the likelihood of survival is slim to none. Further, if you are revived in the 7-10 minute range, the likelihood of notable brain damage and significant lifelong health ramifications thereafter is very high.

**Too Few AEDs**
Applying an AED to someone in sudden cardiac arrest within the three minute response time guideline recommended by the Heart and Stroke Foundation would require that it takes no longer than 90 seconds to get to an AED, and 90 seconds to return to the SCA victim. This means the responder would ideally have to travel no more than 450 feet to reach an AED. Current deployment for these life-saving devices is nowhere near this level of saturation.

**Too Inaccessible**
Beyond having an appropriate number of AEDs, there is the issue of where they should be placed. Best practice recommends having AEDs highly visible and publically accessible; that means they can be easily reachable and the cabinets in which they are stored are unlocked. Many AEDs installed in public locations are either hidden away and/or are under lock and key.

**Too Little AED Awareness**
Despite, in some instances, the above two issues having been addressed, a successful outcome after an SCA event is not guaranteed. Many individuals are still unaware of AEDs and their lifesaving benefits and would not know or think to use one in an emergency. Sadly, there was a tragic case in Calgary where a young athlete collapsed from SCA, the AED was retrieved, but nobody used it on the victim and he died.
A BHAG for Consulting

Inspired by Jim Collin’s book Good to Great, each of Iridia Medical’s departments created a Big Hairy Audacious Goal (BHAG) to motivate their teams toward an envisioned future. BHAGs are not meant to be achieved in a month or even 5 years. BHAGs are meant to be achieved within a 10 to 30 year timeframe, during which there is plenty of time to hone the “Hedgehog Concept,” also originating from Good to Great. The Hedgehog Concept asks the following questions to help identify what you can be the best at and achieve a strategic advantage. The answer lies within the intersection of these questions:

1. What are you deeply passionate about?
2. What can we be the best in the world at?
3. What drives your economic engine?

By answering these questions honestly and objectively, we developed a BHAG for our consulting division representative of each of the above questions. Our answers are as follows:

1. Passionate about making a difference within the realm of healthcare. Providing insight into the physician perspective. Creating harmony amongst different groups with different priorities and experiences.
2. We have a unique position in the market. As consultants, we have a wide range of experience and understand the administrative and management styles supporting our health care system. As physicians, we have unique access into the physician perspective and the operational aspects that make things work. We can “wear both hats” and support clients looking for physician advisory expertise.
3. Our consulting services drive our economic engine. The knowledge and experience of our physicians is a valuable resource to health care provision and planning.

By recognizing these 3 factors, we created a BHAG representative of the consulting division – expert physician consultants available as quickly as a Google search.

We turn to Google for all of our questions whether it’s highly complex or simply mundane. Google doesn’t have all the answers but it quickly connects us with the sites that do. We want to be like Google search– when our clients need answers, we connect them with our physician consultants and provide the subject-matter expertise they are looking for.

Sharing our BHAG serves two purposes. Firstly, we’re now accountable for our BHAG (expect updates over the next 20 years!) and secondly, we believe sharing our BHAG will help us achieve our BHAG. Where Google has access to millions of sites, we need a database of dedicated and knowledgeable physicians. We’re constantly building our physician network, the foundation of our BHAG, and if you or someone you know can help us achieve our BHAG – reach out to the consulting team:

consulting@iridiamedical.com

Rookie Blue - Tales of an MMU Physician

As a new Mobile Medical Unit (MMU) physician, I must say, after finally reaching my room late the first night, I was a bit leery of what I’d signed up for.

Word on the grapevine was that the MMU physicians worked at a pretty relaxed pace. But I had just stepped off the helicopter and found the right key to open the MMU door, when the radio started calling “Medic! Medic! Medic!”.

It was a complicated case which turned out well in the end, but was a steep learning curve for me, starting with ‘where was the light switch?’. The medical part was fine, but finding equipment, using the Windows computer (I’m a Mac guy), and different levels of command, made it an interesting evening.

Everyone, however, was extremely helpful, and the PCPs, Ute in the field and Doug as “neuro nurse” overnight, were fabulous!

After a day or two to familiarize myself with the unit, it has been smooth sailing. The MMU is a state of the art facility. Pretty much everything I’m used to at St. Paul’s ER in Vancouver except, of course, the nurses. As an old ER Doc, I’m used to having their assistance, and my nursing skills such as med delivery, IM injections, and holding emesis basins, needed some extra work!

The patients have been appropriate, routine patients for a GP or ER. It is especially refreshing as a downtown Vancouver physician to treat for non-alcohol or substance related problems (and no rectal foreign bodies!) and where patients are motivated to work again.

So far, I haven’t run into any situations where I didn’t have the appropriate equipment or medication to deal with.

I’ve played with the x-ray machine and have successfully x-rayed a Kleenex box and shoe - although I have not needed to radiate humans yet.

I enjoy working with my Iridia colleagues, both on and off-site, who have been nothing but supportive and friendly. I also have good interaction with the PCPs both in-camp and in the field.

The operation and camp itself, I find fascinating, and I am looking forward to a tour of the site during my shift.

All in all, I rate it a five-star experience with comfortable accommodation, great food and a solid gym. A great time so far and I hope to return again– maybe when it’s a bit warmer.

We’re Hiring!

Iridia Medical employs experienced paramedics looking for opportunities in the resource exploration industry, and we’re always on the lookout for self-starters who take pride in their work.

If you know someone with these qualities who might be interested in working with us, please have them contact us at hr@iridiamedical.com. Learn more about our paramedic careers here.
For one man, a trip to a local mall turned into a cardiac emergency. Without warning, he was struck by sudden cardiac arrest (SCA) – a life-threatening condition that affects up to 40,000 Canadians each year. Without rapid treatment, particularly a shock delivered by an automated external defibrillator (AED), most cardiac arrests result in death.

This man was fortunate to have had his SCA event in the right place and at the right time. Mall security immediately started CPR and knew that using an AED was the critical next step. Fortunately, a London Drugs store was nearby. They had an easily accessible AED located in their pharmacy and, most importantly, staff trained to use it. Thanks to the actions of mall security and London Drugs staff, this man beat the odds and survived his cardiac arrest.

Having ready access to an AED is key, as every 1 minute delay in defibrillation will reduce survival rates by 7% to 10%. The fact that London Drugs had an AED immediately available significantly contributed to this man’s survival – London Drugs clearly demonstrates the importance of public access defibrillation (PAD) programs.

London Drugs is a pioneer in Canada when it comes to implementing a workplace AED program. London Drugs was the first major retailer in Canada to put AEDs into all of their stores and they have trained over 1,000 employees in CPR and the use of an AED. The program was developed in partnership with Iridia Medical who is an industry leader in PAD program development and implementation. Each London Drugs store has an AED located in the pharmacy and the front door of every store has a window sticker indicating that the location is equipped with an AED.

London Drugs’ AED program actively promotes their “good neighbour” policy in recognition that none of the surrounding retail outlets has an AED present. If an AED is needed, London Drugs and their staff are there to help. To date, the AEDs have been used 7 times since the program launched in 2009. In 4 cases, the incidents occurred at surrounding businesses that did not have an AED and London Drug staff responded with their AED.

Canada is making strides when it comes to widespread public access to AEDs. In 2013, the Heart and Stroke Foundation launched a formal PAD Program in British Columbia. This important initiative will see about 650 AEDs placed in public locations over three years. Additionally, in 2014, the government of Canada in partnership with the Heart and Stroke Foundation launched a national campaign. This ground-breaking program will see over 2,000 AEDs installed in arenas and recreational facilities across Canada.

As London Drugs’ AED partner, Iridia, is involved in both of the provincial and federal programs which will help raise the awareness of AEDs and hopefully raise out-of-hospital survival rates.

London Drugs is a glowing example of a workplace AED Program as well as a public access AED program for the community. Please help us by spreading the word about the importance of AEDs through our AEDs Everywhere campaign.
It's all about the “new buzz” in Iridia’s Education Department! On February 22, 2014 the team successfully delivered Iridia’s very first Basic Life Support course for Healthcare Providers at the Vancouver office. With recent updates to the Canadian Heart & Stroke Foundation Guidelines the Basic Life Support course will assist students in completing the pre-requisite for Advanced Cardiac Life Support.

We warmly welcome our newest instructor Graham Harrington as he teaches his first Advanced Cardiac Life Support course with us on March 8, 2014. To register for one of the many courses Graham will be teaching with us please visit our website.

For upcoming course inquiries, registration or to schedule a private class please feel free to contact Iridia’s Education Coordinator, Melissa Palinkas at mpalinkas@iridiamedical.com for further assistance.

**March 2014 Updates!**

**Course Calendar**

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Need to know what’s going on at Iridia? This should be your first stop!

Want to see what’s happening at Iridia? Check out our pinboards.

Stop by and say hi to the Iridia team on our Google+ page.

For the most up-to-date information, head over to our Twitter feed.

Have a look under the hood of Iridia Medical!

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