

#NephJC transcript

Healthcare Social Media Transcript

From: Tue Oct 07 17:00:00 PDT 2014

To: Tue Oct 07 21:00:00 PDT 2014

[change time period](#)

What is **#NephJC**? Who were the influencers during this time period? **#NephJC analytics**

[Healthcare Conference](#) - [Healthcare Tweet Chats](#) - [Healthcare Analytics](#)

hswapnil

RT [@NephJC](#): 90 minutes until **#NephJC** Who's with us!

Tue Oct 7 17:02:09 PDT 2014

weddellite

#nephjc what?! Stones AGAIN?!

Tue Oct 7 17:06:01 PDT 2014

brendonIn

RT [@Nephro_Sparks](#): **#NephJC** **#urojc** RT [@eAJKD](#): NephJC: CT Scan or Ultrasound for the Diagnosis of Suspected Kidney Stones <http://t.co/USdV91F...>

Tue Oct 7 17:09:00 PDT 2014

nephro_sparks

RT [@iurojc](#): Our **#urojc** paper for October also happens to be the paper for discussion with our **#nephjc** friends - do join them for ongoing di...

Tue Oct 7 17:16:25 PDT 2014

hswapnil

[@iurojc](#) wait for **#nephJC** input? Thanks! Can we also compete for your prize, pretty please? **#urojc**

Tue Oct 7 17:23:02 PDT 2014

hswapnil

RT [@iurojc](#): Our **#urojc** paper for October also happens to be the paper for discussion with our **#nephjc** friends - do join them for ongoing di...

Tue Oct 7 17:24:10 PDT 2014

jojolaterrible

RT [@NephJC](#): 90 minutes until **#NephJC** Who's with us!

Tue Oct 7 17:24:22 PDT 2014

pumasiwotily

I'm online!!! Come see meeeee <http://t.co/FazFUuSiyS!> **#pororokepo** **#misano** **#nephjc** **#chanelcruisedubai** **#cunyfirst**

Tue Oct 7 17:39:00 PDT 2014

nephjc

@iurojc we start at 9pm, why don't you have your guys join us for one last hour?
#NephJC

Tue Oct 7 17:39:26 PDT 2014

nephjc

“@weddelite: #nephjc what?! Stones AGAIN?!” Stones forever. I thought you pebbleologists liked this stuff

Tue Oct 7 17:40:07 PDT 2014

hswapnil

@nephjc pebbleologists? this is no pebble! #nephjc <http://t.co/90CpDQOMI6>

Tue Oct 7 17:47:05 PDT 2014

hswapnil

@NephJC picture courtesy @wellcomeimages #NephJC

Tue Oct 7 17:48:19 PDT 2014

nephjc

@hswapnil that's no moon...#NephJC <http://t.co/eqdKYi4aeR>

Tue Oct 7 17:48:50 PDT 2014

hswapnil

RT @NephJC: @iurojc we start at 9pm, why don't you have your guys join us for one last hour? #NephJC

Tue Oct 7 17:51:52 PDT 2014

iurojc

RT @NephJC: @iurojc we start at 9pm, why don't you have your guys join us for one last hour? #NephJC

Tue Oct 7 17:52:29 PDT 2014

iurojc

@NephJC Totally agree. Calling all urologists, please feel free to comment on the same paper being discussed right now on #NephJC

Tue Oct 7 17:53:27 PDT 2014

nephjc

RT @iurojc: @NephJC Totally agree. Calling all urologists, please feel free to comment on the same paper being discussed right now on #Nep...

Tue Oct 7 17:53:49 PDT 2014

canesdavid

RT @iurojc: Our #urojc paper for October also happens to be the paper for discussion with our #nephjc friends - do join them for ongoing di...

Tue Oct 7 17:54:00 PDT 2014

arielfre

RT @iurojc: @NephJC Totally agree. Calling all urologists, please feel free to comment on the same paper being discussed right now on #Nep...

Tue Oct 7 17:54:51 PDT 2014

nephjc

hitting the WC before starting #nephjc

Tue Oct 7 17:59:27 PDT 2014

nephjc

Welcome to #NephJC number 12: CT scan versus U/S by ER MD versus U/S by radiology for suspected nephrolithiasis. <http://t.co/R9ajr1VbPZ>

Tue Oct 7 18:00:46 PDT 2014

- nephjc** My name is Joel Topf, [@kidney_boy](#). I am a co-creator of [#NephJC](#) and will be your host tonight. Please introduce yourselves.
[Tue Oct 7 18:01:17 PDT 2014](#)
- hswapnil** Swapnil Hiremath, nephrologist, from beautiful Ottawa. Only Col: don't like CT (contrast AKI) [#NephJC](#) [#urojc](#) <http://t.co/GFIHxaFzEj>
[Tue Oct 7 18:01:33 PDT 2014](#)
- marushla** Shubha, nephrologist, CA [#nephjc](#)
[Tue Oct 7 18:02:04 PDT 2014](#)
- kidney_boy** Joel Topf. Clinical nephrologist from Detroit. I have no conflicts of interest. [#NephJC](#) <http://t.co/uIKp0z35S7>
[Tue Oct 7 18:02:11 PDT 2014](#)
- nephondemand** Tejas Desai, Nephrology Fellowship Director & Developer of Nephrology On-Demand Plus <http://t.co/WRZRbcu8v5> [#nephjc](#)
[Tue Oct 7 18:02:16 PDT 2014](#)
- hswapnil** We hope some [#uroJC](#), [#ALiEM](#) and radiology colleagues join us today for [#nephjc](#)
[Tue Oct 7 18:02:23 PDT 2014](#)
- nephjc** welcom Tejas, Swapnil and Shubha [#nephjc](#)
[Tue Oct 7 18:02:38 PDT 2014](#)
- edgarvlermamd** Edgar Lerma, Nephrologist, Chicago-based [#NephJC](#)
[Tue Oct 7 18:02:43 PDT 2014](#)
- nephjc** Goldfarb is lurking, and hopefully will remember to add the hashtag [#nephjc](#)
[Tue Oct 7 18:02:58 PDT 2014](#)
- nephjc** ho edgar! [#nephjc](#)
[Tue Oct 7 18:03:07 PDT 2014](#)
- hswapnil** welcome Shubha, Edgar, Tejas [#NephJC](#)
[Tue Oct 7 18:03:21 PDT 2014](#)
- nephjc** FYI We are doing a live [#NephJC](#) at [#KidneyWk14](#) in Philadelphia on Saturday Nov 15. We will be in the Double Tree Ballroom at 12:45. 1/2
[Tue Oct 7 18:03:23 PDT 2014](#)
- nephjc** [#NephJC](#) Live 2/2 [@medpagetoday](#) is buying lunch for everyone who RSVPs. We will have two scientists presenting data and discussion.
[Tue Oct 7 18:03:33 PDT 2014](#)
- weddellite** [#nephjc](#) Goldfarb - lithologist - COI: CaOx stone former
[Tue Oct 7 18:03:35 PDT 2014](#)

hswapnil

RT @NephJC: FYI We are doing a live #NephJC at #KidneyWk14 in Philadelphia on Saturday Nov 15. We will be in the Double Tree Ballroom at 12...

Tue Oct 7 18:03:38 PDT 2014

hswapnil

@weddellite Lithologist sounds grand compared to pebbleologist! #nephjc

Tue Oct 7 18:04:07 PDT 2014

rx_ed

Ed El Sayed #NephJC

Tue Oct 7 18:04:13 PDT 2014

nephro_sparks

Matt Sparks, Duke COI: Work in ER on weekends searching for stones #nephjc

Tue Oct 7 18:04:43 PDT 2014

drraymondhsu

hi everyone! nephrologist in san fran #nephjc

Tue Oct 7 18:04:46 PDT 2014

hswapnil

@DrRaymondHsu Hey, Ray, welcome. This trial is from UCSF - know any of those guys? #nephjc

Tue Oct 7 18:05:24 PDT 2014

nephjc

Ho Matt Ho Ray! #nephjc

Tue Oct 7 18:05:57 PDT 2014

drraymondhsu

@hswapnil i do! have done multiple renal bx's with 1st author! #nephjc

Tue Oct 7 18:06:03 PDT 2014

nephjc

Any of you think you will make it to NephJC live? #nephjc

Tue Oct 7 18:06:10 PDT 2014

marushla

really cool screen name @weddellite for a lithologist! #nephjc

Tue Oct 7 18:06:12 PDT 2014

edgarvlermamdA picture is worth a thousand words #NephJC <http://t.co/ahqdQrhvys>

Tue Oct 7 18:06:31 PDT 2014

marushla

@NephJC wish I could but not attending ASN this year #nephjc

Tue Oct 7 18:07:07 PDT 2014

nephjc

ho Shubha #nephjc

Tue Oct 7 18:07:16 PDT 2014

hswapnil

@NephJC I will (have to as co-founder) make it to #NephJC live - otherwise @kidney_boy will cause some bodily harm!

Tue Oct 7 18:07:16 PDT 2014

nephro_sparks

@NephJC I'll be there #nephjc

Tue Oct 7 18:07:19 PDT 2014

- canesdavid** David Canes, Urologist in Burlington MA. Will make many eGFR references to try to fit in #NephJC
Tue Oct 7 18:07:24 PDT 2014
- nephjc** David, glad you could make it! #nephjc
Tue Oct 7 18:07:39 PDT 2014
- nephjc** This #NephJC is doing the same article as the Legendary #UroJC so hopefully some of the surgeons will weigh in.
Tue Oct 7 18:07:56 PDT 2014
- hswapnil** @CanesDavid thanks for coming! #nephJC
Tue Oct 7 18:07:59 PDT 2014
- nephjc** This #nephJC is primarily a study of emergency medicine and so hopefully that community will also weigh in. #ALiEM
Tue Oct 7 18:08:00 PDT 2014
- hswapnil** RT @NephJC: This #NephJC is doing the same article as the Legendary #UroJC so hopefully some of the surgeons will weigh in.
Tue Oct 7 18:08:15 PDT 2014
- hswapnil** RT @NephJC: This #nephJC is primarily a study of emergency medicine and so hopefully that community will also weigh in. #ALiEM
Tue Oct 7 18:08:50 PDT 2014
- nephro_sparks** @nephjc the choice of diagnostic modality for me when working in the ER is guided mostly on what time of day it is #nephjc
Tue Oct 7 18:10:11 PDT 2014
- nephjc** Abdominal CT is the most common initial imaging test for suspected nephrolithiasis b/c of its high sensitivity for stone disease #NephJC
Tue Oct 7 18:10:15 PDT 2014
- nephjc** Unfortunately it packs a lot of radiation & leads to incidental findings. This causes inappropriate follow up, referral & treatment #NephJC
Tue Oct 7 18:10:25 PDT 2014
- nephjc** Systematic Review: 31.1% (CI 20.1-41.9) of CT scans have incidental findings!
<http://t.co/RARrdbfwOZ> #NephJC
Tue Oct 7 18:10:34 PDT 2014
- nephro_sparks** @nephjc also abdominal CT is good at finding other causes of flank pain #notalwaysastone #nephjc
Tue Oct 7 18:11:06 PDT 2014
- hswapnil** No talk of radiation is complete without this: from <https://t.co/KXMyLcZYHG> #NephJC #urojc <http://t.co/M1uZmRxWCb>
Tue Oct 7 18:11:21 PDT 2014

hswapnil

@Nephro_Sparks Indeed. Easier to get CT done than US - from radiologists. But if ER MDs do it? different ballgame entirely! #nephjc

Tue Oct 7 18:11:38 PDT 2014

drraymondhsu

RT @hswapnil: No talk of radiation is complete without this: from <https://t.co/KXMyLcZYHG> #NephJC #urojc <http://t.co/M1uZmRxWCb>

Tue Oct 7 18:12:07 PDT 2014

nephjc

1 CT scan increases your risk of cancer by 24%. (If you are Australian) Frightening. #NephJC <http://t.co/7wa5JWcRch> <http://t.co/TDHJR2yItq>

Tue Oct 7 18:12:17 PDT 2014

hswapnil

QFT "Unfortunately it packs a lot of radiation & leads to incidental findings. This causes inappropriate follow up, referral & Rx" #nephjc

Tue Oct 7 18:12:29 PDT 2014

kidney_boy

RT @hswapnil: No talk of radiation is complete without this: from <https://t.co/KXMyLcZYHG> #NephJC #urojc <http://t.co/M1uZmRxWCb>

Tue Oct 7 18:12:36 PDT 2014

rx_ed

Doses from Medical Radiation Sources. #NephJC <http://t.co/lcBlfsOXnz>

Tue Oct 7 18:13:03 PDT 2014

nephjc

Here is the data for abd/pelvis CT scans, it was the worst (tied with chest CT scan) #NephJC <http://t.co/9aGEwU0H0D> <http://t.co/ezrEUsQYnh>

Tue Oct 7 18:13:32 PDT 2014

hswapnil

"@weddellite: #urojc @edgarvlrmamd <https://t.co/JILXrT7RgO> #NephJC

Tue Oct 7 18:13:39 PDT 2014

nephjc

Pan Scan RT @hswapnil: "@weddellite: #urojc @edgarvlrmamd <https://t.co/RwgaDEW9QN> #NephJC

Tue Oct 7 18:14:38 PDT 2014

nephjc

In case @weddellite says there is a threshold effect & a CT scan is not enough radiation to increase Ca. #NephJC <http://t.co/t5BcWFJtH1>

Tue Oct 7 18:15:09 PDT 2014

arielfre

@nephjc Ariel Fredrick. Urology resident. Curious about opinions from non-op perspective. #NephJC

Tue Oct 7 18:15:19 PDT 2014

nephjc

Looks pretty linear to me. Source: <http://t.co/MyIW0We5il> #NephJC <http://t.co/Rvh35V6swR>

Tue Oct 7 18:15:27 PDT 2014

hswapnil

@arielfre thanks for joint in Ariel! #nephjc

Tue Oct 7 18:15:40 PDT 2014

nephjc

Her Ariel, thanks for coming. I remember you were a big CT scan fan on Sunday, am I right? #nephjc

Tue Oct 7 18:15:56 PDT 2014

hswapnil

RT @NephJC: Looks pretty linear to me. Source: <http://t.co/MyIW0We5il> #NephJC <http://t.co/Rvh35V6swR>

Tue Oct 7 18:16:02 PDT 2014

marushla

@NephJC : any such data in adults? #nephjc

Tue Oct 7 18:16:34 PDT 2014

hswapnil

@NephJC but it's relative risk not absolute. Incr risk from 0.05 to 0.065 over lifetime versus missed diagnosis now? #nephJC #urojc

Tue Oct 7 18:17:01 PDT 2014

weddellite

@NephJC what's the y axis? RR of using \$\$\$? Or cancers? #nephjc

Tue Oct 7 18:18:13 PDT 2014

nephjc

@marushla I just tracked the references from their introduction. Sorry. But check out this: <http://t.co/KBCvnDAX7j> #nephjc

Tue Oct 7 18:18:49 PDT 2014

canesdavid

@hswapnil have heard radiologist argue since CT so far below yearly rad worker limit, that fears overblown #nephjc

Tue Oct 7 18:19:07 PDT 2014

weddellite

@weddellite I don't have an opinion here - that's what a CTologist said #nephjc

Tue Oct 7 18:19:16 PDT 2014

hswapnil

RT @CanesDavid: @hswapnil have heard radiologist argue since CT so far below yearly rad worker limit, that fears overblown #nephjc

Tue Oct 7 18:19:29 PDT 2014

nephjc

@weddellite developing hematologic or brain malignancy #nephjc

Tue Oct 7 18:19:38 PDT 2014

arielfre

@nephjc No way, I'm all for U/S first - less radiation, no big misses. #NephJC

Tue Oct 7 18:19:49 PDT 2014

hswapnil

@CanesDavid I am sympathetic to that POV #nephjc #urojc a flight from LA to NY is >> a CT

Tue Oct 7 18:20:04 PDT 2014

nephjc

@CanesDavid sounds like eminence based medicine BS. The data is going the other way. Threatens their wallet. #nephjc

Tue Oct 7 18:20:28 PDT 2014

nephjc

Question of the study is does the higher clinical accuracy of CT lead to better outcomes? #NephJC

Tue Oct 7 18:21:09 PDT 2014

hswapnil

This is a study of strategy: should we do US or CT FIRST for suspected stones; not which one is more sensitive/specific #nephjc

Tue Oct 7 18:21:37 PDT 2014

nephjc

15 different centers randomized 1:1:1 U/S by ER doc U/S by radiologist abdominal CT scan from Oct '11 to Feb '13 #NephJC

Tue Oct 7 18:21:50 PDT 2014

canesdavid

@NephJC good point. The propaganda is self serving for sure #nephjc

Tue Oct 7 18:22:07 PDT 2014

hswapnil

RT @NephJC: 15 different centers randomized 1:1:1 U/S by ER doc U/S by radiologist abdominal CT scan from Oct '11 to Feb '13 #NephJC

Tue Oct 7 18:22:17 PDT 2014

hswapnil

@NephJC Also, kudos to @AHRQNews for funding this trial! #NephJC #urojc

Tue Oct 7 18:22:41 PDT 2014

nephjc

@CanesDavid I always wear sunscreen on cross country plane trips. #TheMoreYouKnow #nephjc

Tue Oct 7 18:23:05 PDT 2014

rx_ed

Indinavir stones are radiolucent and usually undetectable on CT. #NephJC

Tue Oct 7 18:23:13 PDT 2014

nephjc

Flank or abdominal pain eligible for entry if the emergency doc ordered imaging to diagnose or rule out kidney stones #NephJC

Tue Oct 7 18:23:14 PDT 2014

nephro_sparks

how many ER docs are doing their own U/S for suspected stone #howdotheyhavetimeforthis #nephjc

Tue Oct 7 18:23:36 PDT 2014

nephjc

RT @Rx_Ed: Indinavir stones are radiolucent and usually undetectable on CT. #NephJC History important there #nephjc

Tue Oct 7 18:23:47 PDT 2014

hswapnil

Indeed; and can they bill for it? MT @Nephro_Sparks: how many ER docs are doing their own U/S for suspected stone #nephjc

Tue Oct 7 18:24:31 PDT 2014

rx_ed

Summary of the chemical composition and radiological characteristics of drug induced stones. #NephJC <http://t.co/cuONIEA5q>

Tue Oct 7 18:24:36 PDT 2014

edgarvlermamd

@AmerUrological recommends CT as first imaging test for suspected stone #NephJC <http://t.co/zENYsVQQVA> #urojc <http://t.co/N1n9XbPJsm>

Tue Oct 7 18:25:10 PDT 2014

hswapnil

RT @edgarvlermamd: @AmerUrological recommends CT as first imaging test for suspected stone #NephJC <http://t.co/zENYsVQQVA> #urojc <http://t...>

Tue Oct 7 18:25:37 PDT 2014

nephjc

@edgarvlermamd guideline predate this study, it will be interesting if they change their position in the face of you know, evidence. #nephjc

Tue Oct 7 18:26:06 PDT 2014

hswapnil

@edgarvlermamd @AmerUrological But G/L may be lagging behind evidence? #nephjc #urojc

Tue Oct 7 18:26:16 PDT 2014

nephjc

high risk for serious diagnoses: acute chole, appy, aortic aneurysm, or bowel disorders, were not eligible. No pregnant pts #NephJC

Tue Oct 7 18:26:18 PDT 2014

marushla

important to remember the entry criteria is patients suspected ONLY of stones. Not stones in the broad differential. #nephjc

Tue Oct 7 18:26:46 PDT 2014

edgarvlermamd

@hswapnil @AmerUrological So you think this 1 study is PRACTICE CHANGING???

#NephJC
Tue Oct 7 18:27:04 PDT 2014

hswapnil

Inclusion criteria appropriately broad; exclusion reasonable. Any1 have any objections? #nephjc

Tue Oct 7 18:27:05 PDT 2014

hswapnil

RT @marushla: important to remember the entry criteria is patients suspected ONLY of stones. Not stones in the broad differential. #nephjc

Tue Oct 7 18:27:28 PDT 2014

canesdavid

@Rx_Ed anyone seen a drug stone outside of a textbook? I haven't in 13 yrs. #nephjc

Tue Oct 7 18:27:31 PDT 2014

arielfre

@nephro_sparks US should probably be part of a good emergency PE in many cases #NephJC

Tue Oct 7 18:28:04 PDT 2014

nephjc

+1 RT @CanesDavid: @Rx_Ed anyone seen a drug stone outside of a textbook? I haven't in 13 yrs. #nephjc

Tue Oct 7 18:28:11 PDT 2014

nephjc

Possible problem: Men weighing more than 129 kg (285 lb) and women weighing more than 113 kg (250 lb) were excluded #NephJC

Tue Oct 7 18:28:32 PDT 2014

nephjc

"41.6% had a history of stones, 63.3% had hematuria, 52.5% had costovertebral-angle tenderness" Pre-test prob sounds high! #NephJC

Tue Oct 7 18:28:48 PDT 2014

hswapnil

that's the new paradigm! @arielfre: @nephro_sparks US should probably be part of a good emergency PE in many cases #NephJC

Tue Oct 7 18:28:53 PDT 2014

edgarvlermamd

@CanesDavid @Rx_Ed I would defer that question to @weddellite #NephJC

Tue Oct 7 18:29:34 PDT 2014

nephjc

+1 RT @arielfre: @nephro_sparks US should probably be part of a good emergency PE in many cases #NephJC

Tue Oct 7 18:29:36 PDT 2014

hswapnil

excluding >129/113 kg people doesn't affect internal validity; only limits generalizability to those population #nephjc

Tue Oct 7 18:29:53 PDT 2014

nephro_sparks

drug induced stones tend to cluster around Pearson VUE testing centers #onlyonboards #nephjc

Tue Oct 7 18:30:15 PDT 2014

hswapnil

"@kdjhaveri: @NephJC but pre test prob should be high for any test you order that involves radiation I think." #NephJC

Tue Oct 7 18:30:29 PDT 2014

nephjc

Seeing residents doing their own U/S makes me feel old. #BehindTheTimes #StillUsePercussion #NephJC

Tue Oct 7 18:30:33 PDT 2014

drraymondhsu

RT @Nephro_Sparks: drug induced stones tend to cluster around Pearson VUE testing centers #onlyonboards #nephjc

Tue Oct 7 18:31:00 PDT 2014

hswapnil

@kdjhaveri thanks for joining in the convo Kenar, #NephJC

Tue Oct 7 18:31:04 PDT 2014

kdjhaveri

RT @NephJC: Seeing residents doing their own U/S makes me feel old. #BehindTheTimes #StillUsePercussion #NephJC

Tue Oct 7 18:31:16 PDT 2014

nephjc

that is really funny RT @Nephro_Sparks: drug induced stones tend to cluster around Pearson VUE testing centers #onlyonboards #nephjc

Tue Oct 7 18:31:22 PDT 2014

nephjc

Kenar makes an appearance! #nephjc

Tue Oct 7 18:31:33 PDT 2014

marushla

RT @Nephro_Sparks: drug induced stones tend to cluster around Pearson VUE testing centers #onlyonboards #nephjc

Tue Oct 7 18:31:33 PDT 2014

nephjc

1° outcomes: 1 high-risk diagnoses & complications related to missed/delayed

diagnoses 2 cumulative radiation exposure 3 total costs #NephJC

Tue Oct 7 18:32:04 PDT 2014

hswapnil

@Nephro_Sparks Aiming for the tweet of the week again? #nephjc

Tue Oct 7 18:32:10 PDT 2014

hswapnil

Premise of trial seems to be: can US compared to CT result in similar n of missed

Tue Oct 7 18:32:37 PDT 2014

nephjc

What does it mean to have 3 primary outcomes, Do they need a refresher on the meaning of primary? #nephjc

Tue Oct 7 18:32:47 PDT 2014

drraymondhsu

@NephJC love these outcomes, very pragmatic #nephjc

Tue Oct 7 18:33:14 PDT 2014

nephjc

Patients were contacted at 3, 7, 30, 90, and 180 days after randomization to assess study outcomes #NephJC

Tue Oct 7 18:33:24 PDT 2014

marushla

I had the same question # 3 primaryoutcomes ? #nephjc

Tue Oct 7 18:33:43 PDT 2014

marushla

so which outcome are they powering their study to? #nephjc

Tue Oct 7 18:34:06 PDT 2014

hswapnil

Pragmatic's the word! or comparative effectiveness research MT @DrRaymondHsu: @NephJC love these outcomes, very pragmatic #nephjc

Tue Oct 7 18:34:09 PDT 2014

hswapnil

1 outcome (no difference in missed/delayed diagnosis) should've been a non-inferiority Q. But sample size suggests maybe not. #NephJC #urojc

Tue Oct 7 18:34:21 PDT 2014

rx_ed

Can U/S accurately detect small stones (especially in the corticomedullary junction)? #NephJC

Tue Oct 7 18:34:22 PDT 2014

hswapnil

Contd: great #openaccess reference on non-inferiority: <http://t.co/nBeCLKmDWI> #NephJC #urojc

Tue Oct 7 18:34:42 PDT 2014

hswapnil

@Rx_Ed likely not: This is one of the diagnostic accuracy papers with CT as gold std: <http://t.co/n8yKawzRcj> #NephJC #urojc

Tue Oct 7 18:35:35 PDT 2014

nephjc

2° outcomes: 1. serious adverse events 2. SAE related to participation 3. return to ED & hospitalizations after d/c #NephJC

Tue Oct 7 18:35:50 PDT 2014

nephjc

2° outcomes (cont): 4. self-reported pain scores 5. diagnostic accuracy for nephrolithiasis #NephJC

Tue Oct 7 18:35:53 PDT 2014

rx_ed

@canesdavid Does that mean they don't exist or that we need to be less vigilant when prescribing high risk drugs? #NephJC

Tue Oct 7 18:36:14 PDT 2014

canesdavid

Question for the group: if you were the reviewer would you accept? Revisions? Reject? Why? #nephjc

Tue Oct 7 18:36:38 PDT 2014

amardbansal

One less reason for patients to get a CT after vital signs are taken in triage. #nephjc

Tue Oct 7 18:36:58 PDT 2014

drraymondhsu

@marushla just looked at protocol i think all 3 outcomes were considered for sample size #nephjc

Tue Oct 7 18:37:11 PDT 2014

marushla

@CanesDavid wouldn't that come towards the end of the discussion? #nephjc

Tue Oct 7 18:37:13 PDT 2014

hswapnil

@CanesDavid I would ask sample size question. very few missed/delayed diagnosis to prove US is non-inferior to CT #nephjc

Tue Oct 7 18:37:46 PDT 2014

signindoc

RT @NephJC: Seeing residents doing their own U/S makes me feel old. #BehindTheTimes #StillUsePercussion #NephJC

Tue Oct 7 18:38:13 PDT 2014

nephjc

Looks like a tight study 89% of eligible patients made it to the ITT population. Great work! #NephJC <http://t.co/syJFP5oYfr>

Tue Oct 7 18:38:27 PDT 2014

marushla

@hswapnil this goes to show you how good the ED docs were in clinical diagnosis of stones! #nephjc

Tue Oct 7 18:38:56 PDT 2014

signindoc

RT @NephJC: RT @Rx_Ed: Indinavir stones are radiolucent and usually undetectable on CT. #NephJC History important there #nephjc

Tue Oct 7 18:39:08 PDT 2014

hswapnil

@DrRaymondHsu Yes, but it still looks strange. Did they expect CT to be superior to US? Looks like setup to fail (my skeptic side) #NephJC

Tue Oct 7 18:39:29 PDT 2014

hswapnil

RT @NephJC: Looks like a tight study 89% of eligible patients made it to the ITT population. Great work! #NephJC <http://t.co/syJFP5oYfr>

Tue Oct 7 18:39:40 PDT 2014

hswapnil

“@kdjhaveri: @hswapnil @DrRaymondHsu @NephJC totally a novel and practical approach” #nephjc

Tue Oct 7 18:40:26 PDT 2014

nephjc

Anybody think there is anything to see on table 1? #NephJC <http://t.co/e7HCwW3BZO>

Tue Oct 7 18:40:32 PDT 2014

kdjhaveri

RT @NephJC: Kenar makes an appearance! #nephjc

Tue Oct 7 18:40:37 PDT 2014

edgarvlermamd

@hswapnil @CanesDavid What's the negative predictive value of an U/S in detecting a stone? #NephJC

Tue Oct 7 18:41:19 PDT 2014

hswapnil

@NephJC proof of good randomization? <http://t.co/jv21cUFI6> #nephjc

Tue Oct 7 18:41:44 PDT 2014

nephjc

@CanesDavid I would have liked to look at clinical characteristics of U/S pts who then got CT scans. Fevers? Abnl U/A? Pain scores? #nephjc

Tue Oct 7 18:41:52 PDT 2014

nephjc

very few high risk diagnosis #NephJC <http://t.co/DjlrNM8NDF>

Tue Oct 7 18:42:16 PDT 2014

nephro_sparks

@NephJC any data on patient weights? this could limit use of U/S #nephjc

Tue Oct 7 18:43:04 PDT 2014

drraymondhsu

@hswapnil don't think they assumed CT better, but used data from prior CT studies to come up with potential difference with US group #nephjc

Tue Oct 7 18:43:24 PDT 2014

hswapnil

@edgarvlermamd Sensitivity is high, but NPV would depend on prevalence/pre-test probability #nephjc

Tue Oct 7 18:43:46 PDT 2014

arielfre

@nephjc @canesdavid also what US findings prompted CT? Just hydro? #NephJC

Tue Oct 7 18:44:36 PDT 2014

nephjc

@Nephro_Sparks no data. Just excluded men over 129 kg and women over 113 kg. Fat Shaming? #nephjc

Tue Oct 7 18:44:58 PDT 2014

marushla

@arielfre I don't think that was clear in the paper #nephjc

Tue Oct 7 18:45:30 PDT 2014

drraymondhsu

#ATL was a site -- likely broad range of weights? #nephjc

Tue Oct 7 18:45:35 PDT 2014

rx_ed

[@canesdavid](#) I would ask if there was a history of UTI, and if there were any U/S patients who developed spontaneous extravasation. [#NephJC](#)

Tue Oct 7 18:46:34 PDT 2014

nephjc

Anything of note on Table 2? Didn't see anything. [#NephJC](#) <http://t.co/G5633Q6duN>

Tue Oct 7 18:47:47 PDT 2014

hswapnil

RT [@NephJC](#): Anything of note on Table 2? Didn't see anything. [#NephJC](#)
<http://t.co/G5633Q6duN>

Tue Oct 7 18:48:13 PDT 2014

nephjc

[@arielfre](#) follow up CT after U/S ITT was physician directed. Not on the protocol. [#nephjc](#)

Tue Oct 7 18:48:28 PDT 2014

nephjc

All important Table 3, also known as the sweet marrow of the study. [#NephJC](#)
<http://t.co/U51MY2IzIP>

Tue Oct 7 18:48:54 PDT 2014

weddellite

[@CanesDavid](#) drug-induced: lot of Topomax and some atazanavir (only stones NOT seen on CT are protease inhibitors) [#nephjc](#)

Tue Oct 7 18:49:25 PDT 2014

marushla

the ER docs knowing 40% of patients had h/o kidney stones and now with pain - potential bias? [#nephjc](#)

Tue Oct 7 18:49:26 PDT 2014

marushla

table 2: about 40% of patients had h/o stones. potential bias when the ED docs know what they're looking for? [#nephjc](#)

Tue Oct 7 18:50:18 PDT 2014

nephjc

[@weddellite](#) I have see topomax stones a few times, but those are CaPhos stones, not crystalized drug stones [#nephjc](#)

Tue Oct 7 18:50:33 PDT 2014

drraymondhsu

table2 odd "enrolling physician--highly suggestive of appy,AA..."i thought those were excluded [#nephjc](#)

Tue Oct 7 18:50:43 PDT 2014

nephjc

Very low true positive rate especially how rich the study population seemed. Only 32% stoned. [#NephJC](#) <http://t.co/3uUGfcLH3p>

Tue Oct 7 18:50:47 PDT 2014

hswapnil

ER length of stay was not 1 or 2 outcome; but pops up here in table 3...hmmm [#nephjc](#)

Tue Oct 7 18:50:52 PDT 2014

edgarvlermamd

This study <http://t.co/LItlLzXLBt> suggests that if nephrolithiasis is suspected, 1st imaging modality should be ULTRASOUND, Right? [#NephJC](#)

Tue Oct 7 18:51:08 PDT 2014

nephjc

Data mining RT @hswapnil: ER length of stay was not 1 or 2 outcome; but pops up here in table 3...hmmm #nephjc

Tue Oct 7 18:51:13 PDT 2014

signindoc

@NephJC #NephJC Easier to get a CT than a US everywhere! (Table 3 LOS)

Tue Oct 7 18:51:38 PDT 2014

arielfre

@NephJC more of a "just wondering" kind of question. It wouldn't have contributed to the outcomes of the study #nephjc

Tue Oct 7 18:51:54 PDT 2014

edgarvlermamd

If clinical suspicion for nephrolithiasis is high, yet US is negative, then CT would be the 2nd imaging modality, Right? #NephJC

Tue Oct 7 18:52:02 PDT 2014

marushla

test tweet - (didn't see my 2 prior tweets come through) #nephjc

Tue Oct 7 18:52:21 PDT 2014

nephro_sparks

@hswapnil I thought the length of stay would be lower with the U/S wielding ER docs #nephjc

Tue Oct 7 18:52:25 PDT 2014

hswapnil

Good catch! @DrRaymondHsu: table2 odd "enrolling physician--highly suggestive of appy,AA..."i thought those were excluded #nephjc

Tue Oct 7 18:52:26 PDT 2014

rx_ed

U/S with the twinkling artifact for enhanced stone detection has a huge clinical potential. #NephJC <http://t.co/IRrvmWMHtx>

Tue Oct 7 18:52:34 PDT 2014

hswapnil

RT @NephJC: Very low true positive rate especially how rich the study population seemed. Only 32% stoned. #NephJC <http://t.co/3uUGfclH3p>

Tue Oct 7 18:52:54 PDT 2014

marushla

table 2: about 40% of patients had pre existing stones. potential bias when physicians knew what they were probably looking for. #nephjc

Tue Oct 7 18:53:14 PDT 2014

edgarvlermamd

If clinical suspicion for nephrolithiasis is high, and US is positive, I would think the next step would be to do a CT #NephJC

Tue Oct 7 18:53:23 PDT 2014

hswapnil

@Nephro_Sparks It was; also CT. radiologists doing US was longest, as suspected #nephjc

Tue Oct 7 18:53:56 PDT 2014

nephjc

41% in the point-of-care U/S group and 27% in the radiology U/S group underwent CT on initial visit. #NephJC

Tue Oct 7 18:53:58 PDT 2014

@Nephro_Sparks 41% of the U/S wielding doctors then ordered a CT scan. 2 images

nephjcslower than 1. But worth 2000 words. [#nephjc](#)

Tue Oct 7 18:54:34 PDT 2014

marushla[@nephjc](#) : table 2: about 40% of patients had h/o stones. Potential bias as they knew what they were looking for! [#nephjc](#)

Tue Oct 7 18:54:51 PDT 2014

hswapnil[@signindoc](#) [@NephJC](#) Ho Ross, thanks for joining in! [#NephJC](#)

Tue Oct 7 18:55:02 PDT 2014

hswapnilRT [@edgarvlermamd](#): If clinical suspicion for nephrolithiasis is high, and US is positive, I would think the next step would be to do a CT ...

Tue Oct 7 18:55:15 PDT 2014

nephjc5.1% of the patients in the CT group underwent ultrasonography [#NephJC](#)

Tue Oct 7 18:55:36 PDT 2014

nephjcSpecificity data on CT is shameful. Gold standard was insensitive (captured stone only) stones caught by CT lowered specificity [#nephjc](#)

Tue Oct 7 18:55:40 PDT 2014

nephjc5 more minutes. Final thoughts? [#nephjc](#)

Tue Oct 7 18:56:04 PDT 2014

nephro_sparks[@hswapnil](#) median length of stay for the U/S wielding ER doc was 6.3hr vs. donut hole CT at 6.4hr [#nephjc](#)

Tue Oct 7 18:56:16 PDT 2014

edgarvlermamd[@signindoc](#) [@NephJC](#) I think the "curve ball" here is that the ER Doc is also the bedside sonographer [#NephJC](#)

Tue Oct 7 18:56:51 PDT 2014

weddelliteYoung people like cystinuria will have a lifetime of imaging - MUCH more imp't for them [#nephjc](#)

Tue Oct 7 18:57:02 PDT 2014

hswapnil[@NephJC](#) Their standards were very stringent. Perhaps CT picks tiny stones that patients don't notice, or that don't need surgery? [#nephjc](#)

Tue Oct 7 18:57:03 PDT 2014

nephjc[@edgarvlermamd](#) explain? [#nephjc](#)

Tue Oct 7 18:57:11 PDT 2014

shomik_sRT [@hswapnil](#): No talk of radiation is complete without this: from <https://t.co/KXMyLcZYHG> [#NephJC](#) [#urojc](#) <http://t.co/M1uZmRxWCb>

Tue Oct 7 18:57:17 PDT 2014

nephjc[@hswapnil](#) I'm sure that's the case. But should the specificity be ding'd for that? [#nephjc](#)

Tue Oct 7 18:57:37 PDT 2014

nephjc

+1 RT @weddelite: Young people like cystinuria will have a lifetime of imaging - MUCH more imp for them #nephjc

Tue Oct 7 18:58:02 PDT 2014

nephondemand

here's a crazy idea -- how about we reintroduce ultrasonography for renal fellows & have THEM perform the U/S in the ED? #nephjc

Tue Oct 7 18:58:34 PDT 2014

nephjc

Lots of recurrent stone formers get a ct scan every ER visit. This is a tragic waste of resources and piling on of radiation. #nephjc

Tue Oct 7 18:58:48 PDT 2014

drraymondhsu

trial has high impact for ED providers but generalizeability limited ie if US not readily available across all #nephjc

Tue Oct 7 18:58:58 PDT 2014

hswapnil

@NephJC they had to - since that was their "gold standard" - passage of stone or surgery - too stringent but clinically relevant #nephjc

Tue Oct 7 18:59:12 PDT 2014

nephjc

+1 RT @nephondemand: how about we reintroduce ultrasonography for renal fellows & have THEM perform the U/S in the ED? #nephjc

Tue Oct 7 18:59:18 PDT 2014

hswapnil

RT @weddelite: Young people like cystinuria will have a lifetime of imaging - MUCH more imp for them #nephjc

Tue Oct 7 18:59:25 PDT 2014

hswapnil

RT @NephJC: Lots of recurrent stone formers get a ct scan every ER visit. This is a tragic waste of resources and piling on of radiation. #...

Tue Oct 7 18:59:31 PDT 2014

signindoc

.@weddelite True, + RTA with "gravel" and pain get far too many CTs. Opioid-seeking label is a downside. Indicate US only on chart #nephJC

Tue Oct 7 18:59:49 PDT 2014

nephro_sparks

RT @NephJC: +1 RT @nephondemand: how about we reintroduce ultrasonography for renal fellows & have THEM perform the U/S in the ED? #nephjc

Tue Oct 7 18:59:58 PDT 2014

signindoc

RT @edgarvlermamd: @signindoc @NephJC I think the "curve ball" here is that the ER Doc is also the bedside sonographer #NephJC

Tue Oct 7 19:00:04 PDT 2014

drraymondhsu

not sure if it changes urologist/nephrologist practices because we see more complicated stoners #nephjc

Tue Oct 7 19:00:08 PDT 2014

hswapnil

RT @DrRaymondHsu: not sure if it changes urologist/nephrologist practices because

we see more complicated stoners #nephjc

Tue Oct 7 19:00:23 PDT 2014

edgarvlermamd

@NephJC I would think it'd be faster to do Bedside U/S in the ER vs scheduling for transport pick-up, CT, etc #NephJC

Tue Oct 7 19:00:23 PDT 2014

drraymondhsu

@Nephro_Sparks that means you have to go in at night to supervise them #nephjc

Tue Oct 7 19:01:03 PDT 2014

nephjc

@edgarvlermamd but 40% required CT anyways, negating speed advantage. #nephjc

Tue Oct 7 19:01:06 PDT 2014

nephjc

@DrRaymondHsu that's what junior faculty are for. #nephjc

Tue Oct 7 19:01:22 PDT 2014

nephro_sparks

@DrRaymonHsu I'll be in the ER moonlighting anyway #nephjc

Tue Oct 7 19:01:33 PDT 2014

hswapnil

new gen of ER MDs likely know how to do US - or should, important beyond kidney stones IMO #nephjc

Tue Oct 7 19:01:36 PDT 2014

nephro_sparks

@DrRaymondHsu I'll be in the ER moonlighting anyway #nephjc

Tue Oct 7 19:02:00 PDT 2014

nephondemand

@DrRaymondHsu perhaps our disinterest in going in at night to supervise our fellows contributes to their disinterest in nephrology #nephjc

Tue Oct 7 19:02:04 PDT 2014

nephjc

Thanks for showing up and contributing everyone. Great discussion. Look for the Live #NephJC sign up soon!

Tue Oct 7 19:02:15 PDT 2014

signindoc

@NephJC @nephondemand Great comment - we need to encourage this for sure! #nephJC

Tue Oct 7 19:02:17 PDT 2014

drraymondhsu

@nephondemand true. spoken like a great clinician-educator :-) #nephjc

Tue Oct 7 19:02:57 PDT 2014

nephondemand

@DrRaymondHsu or just educator!! not sure about the "great" part. thanks though. appreciate it. #nephjc

Tue Oct 7 19:03:23 PDT 2014

edgarvlermamd

@NephJC Yup... just like a "curve ball" will not always get a strike ... Sometimes it's just a "foul ball" #NephJC

Tue Oct 7 19:03:24 PDT 2014

- hswapnil** great discussion! special thanks to @CanesDavid and @arielfre from #uroJC for joining in! #nephjc
Tue Oct 7 19:03:33 PDT 2014
- nephondemand** @nephJC @hswapnil Here is the summary of tonight's journal club <https://t.co/XbgCh8sVpP> #nephjc
Tue Oct 7 19:03:48 PDT 2014
- hswapnil** RT @nephondemand: @nephJC @hswapnil Here is the summary of tonight's journal club <https://t.co/XbgCh8sVpP> #nephjc
Tue Oct 7 19:04:29 PDT 2014
- weddellite** More stones! #nephjc
Tue Oct 7 19:04:31 PDT 2014
- hswapnil** “@signindoc: .@hswapnil Yet more than ER docs need to understand this technique” #nephjc
Tue Oct 7 19:05:03 PDT 2014
- urologymatch** “@iurojc: @NephJC Totally agree Calling all urologists, please feel free to comment on the same paper being discussed right now on #NephJC”
Tue Oct 7 19:06:06 PDT 2014
- azizenad** RT @edgarvlermamd: This study <http://t.co/LtIILzXLBt> suggests that if nephrolithiasis is suspected, 1st imaging modality should be ULTRASOU...
Tue Oct 7 19:06:24 PDT 2014
- azizenad** RT @edgarvlermamd: If clinical suspicion for nephrolithiasis is high, yet US is negative, then CT would be the 2nd imaging modality, Right?...
Tue Oct 7 19:06:30 PDT 2014
- edgarvlermamd** @NephJC @nephondemand 2 words: Turf War #NephJC
Tue Oct 7 19:08:03 PDT 2014
- arielfre** @signindoc @nephjc @nephondemand As discussed in #urojc, fellows would be thrilled to get that call from ED #NephJC
Tue Oct 7 19:08:45 PDT 2014
- nephondemand** Turf War seems 2 B a war that we keep losing: ICU vs Renal 4 CRRT; Urol vs Renal 4 stones; Rheum v Renal 4 lupus; Cards v Renal 4 UF #nephjc
Tue Oct 7 19:09:45 PDT 2014
- edgarvlermamd** @NephJC @nephondemand I think in some Nephrology programs eg Emory, they already do Routine U/S in Inpatients but not in ER #NephJC
Tue Oct 7 19:09:57 PDT 2014
- nephondemand** Yes. I trained at Emory -- we did our own U/S. Pain to move the U/S machine but such a terrific educational experience #nephjc
Tue Oct 7 19:10:29 PDT 2014

k2optimist

RT @hswapnil: No talk of radiation is complete without this: from <https://t.co/KXMyLcZYHG> #NephJC #urojc <http://t.co/M1uZmRxWCb>

Tue Oct 7 19:11:44 PDT 2014

nephondemand

@hswapnil @nephJC Here is the blog recap -- summarized <https://t.co/XbgCh8sVpP> #nephjc

Tue Oct 7 19:12:36 PDT 2014

nephjc

Analytics for #nephjc 12 from @healthhashtags <http://t.co/AJ4Sw2lbc3>

Tue Oct 7 19:13:07 PDT 2014

signindoc

.@arielfre @NephJC @nephondemand Urology/Nephrology PDs need to support this (RCPSC requirement would work :)) #NephJC ?Joint courses.

Tue Oct 7 19:14:19 PDT 2014

uretericbud

#urojc and #NephJC discussing same paper in same week. Fascinating. Looks like grade level of a Tweets nearly doubled overnight.

Tue Oct 7 19:15:21 PDT 2014

edgarvlermamd

@nephondemand I did my 2-day Mini-Fellowship followed by 7-day Renal U/S training with Dr Charlie O'Neil as well #NephJC

Tue Oct 7 19:16:30 PDT 2014

gameyadav

RT @hswapnil: new gen of ER MDs likely know how to do US - or should, important beyond kidney stones IMO #nephjc

Tue Oct 7 19:26:19 PDT 2014

dr_nikhilshah

RT @nephondemand: @nephJC @hswapnil Here is the summary of tonight's journal club <https://t.co/XbgCh8sVpP> #nephjc

Tue Oct 7 19:26:26 PDT 2014

uncurology

RT @uretericbud: #urojc and #NephJC discussing same paper in same week. Fascinating. Looks like grade level of a Tweets nearly doubled over...

Tue Oct 7 19:32:55 PDT 2014

alittlemedic

RT @hswapnil: No talk of radiation is complete without this: from <https://t.co/KXMyLcZYHG> #NephJC #urojc <http://t.co/M1uZmRxWCb>

Tue Oct 7 19:42:06 PDT 2014

romynsa

RT @hswapnil: No talk of radiation is complete without this: from <https://t.co/KXMyLcZYHG> #NephJC #urojc <http://t.co/M1uZmRxWCb>

Tue Oct 7 19:48:06 PDT 2014

amardbansal

RT @NephJC: 1° outcomes: 1 high-risk diagnoses & complications related to missed/delayed diagnoses 2 cumulative radiation exposure 3 total ...

Tue Oct 7 19:50:00 PDT 2014

hswapnil

@EBMGoneWild @CanesDavid Ahh you are right, my bad. Even low dose CT is >> flight <http://t.co/UPXDW2vEVi> #nephjc

Tue Oct 7 19:55:16 PDT 2014

edgarvlermamd

Nephrolithiasis 101: Appearance of stones on urinary tract imaging #Nephpearls #NephJC <http://t.co/HqTLgMCzXQ> ...

Tue Oct 7 19:57:55 PDT 2014

ajkdblog

@NephJC You've been quoted in my #Storify story "#NephJC 12" <http://t.co/kXD3I9ShEr>

Tue Oct 7 20:29:51 PDT 2014

hswapnil

#NephJC 12 <https://t.co/QDrct3RIRb> via @eajkd

Tue Oct 7 20:31:55 PDT 2014

ajkdblog

@weddellite @CanesDavid @arielfre You've been quoted in my #Storify story "#NephJC 12" <http://t.co/kXD3I9ShEr>

Tue Oct 7 20:33:28 PDT 2014

ajkdblog

@marushla @DrRaymondHsu @Nephro_Sparks You've been quoted in my #Storify story "#NephJC 12" <http://t.co/kXD3I9ShEr>

Tue Oct 7 20:33:59 PDT 2014

ajkdblog

@hswapnil @edgarvlermamd @UCRadSafety You've been quoted in my #Storify story "#NephJC 12" <http://t.co/kXD3I9ShEr>

Tue Oct 7 20:34:09 PDT 2014

edgarvlermamd

Nephrolithiasis 101: Appearance of stones on urinary tract imaging #Nephpearls #NephJC <http://t.co/HqTLgMCzXQ> ... <http://t.co/qba6a8gUsB>

Tue Oct 7 20:37:05 PDT 2014

franloachamin

RT @edgarvlermamd: Nephrolithiasis 101: Appearance of stones on urinary tract imaging #Nephpearls #NephJC <http://t.co/HqTLgMCzXQ> ... <http://t.co/HqTLgMCzXQ>

Tue Oct 7 20:42:16 PDT 2014

franloachamin

RT @edgarvlermamd: @nephondemand I did my 2-day Mini-Fellowship followed by 7-day Renal U/S training with Dr Charlie O'Neil as well #NephJC

Tue Oct 7 20:42:19 PDT 2014

dr_nikhilshah

RT @hswapnil: No talk of radiation is complete without this: from <https://t.co/KXMyLcZYHG> #NephJC #urojc <http://t.co/M1uZmRxWCb>

Tue Oct 7 20:47:45 PDT 2014

dr_nikhilshah

RT @nephondemand: Turf War seems 2 B a war that we keep losing: ICU vs Renal 4 CRRT; Urol vs Renal 4 stones; Rheum v Renal 4 lupus; Cards v...

Tue Oct 7 20:49:41 PDT 2014

dr_nikhilshah

RT @nephondemand #nephjc - @hswapnil @kidney_boy : ...Cards v Renal 4 UF; etc Turf War continues - procedures - radiology v nephrology

Tue Oct 7 20:52:30 PDT 2014

dr_nikhilshah

RT @nephondemand: @DrRaymondHsu perhaps our disinterest in going in at night to supervise our fellows contributes to their disinterest in...

Tue Oct 7 20:54:27 PDT 2014

nephjc

“@hswapnil: new gen of ER MDs likely know how to do US - or should, important beyond kidney stones IMO #nephjc” cc @TChanMD for comments?

Tue Oct 7 20:56:49 PDT 2014

matteoborselli

RT @hswapnil: No talk of radiation is complete without this: from <https://t.co/KXMyLcZYHG> #NephJC #urojc <http://t.co/M1uZmRxWCb>

Tue Oct 7 20:58:42 PDT 2014