

Expanded Curriculum Vitae: Dr. Stevan R. Bruijns

(Updated 10 July 2018)

1. Qualifications and registrations

1.1 Qualifications

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| • PhD (emergency medicine) | University of Cape Town | Dec 2013 |
| • Fellow of the Royal College of Emergency Medicine (FRCEM) | Royal College of Emergency Medicine (UK) | Jun 2011 |
| • MPhil (emergency medicine) | University of Cape Town | Dec 2006 |
| • Diploma in Primary Emergency Care (DipPEC) | Colleges of Medicine of South Africa | Oct 2001 |
| • MBChB | University of Pretoria | Dec 1999 |

Notable courses and certifications

- Mentoring the Mentors in Global Health and Research Workshop, Johannesburg (March, 2016)
(note: presented by the UCGHI GloCal Health Fellowship and the UJMT Fogarty Global Health Fellowship Consortium)
- Short course for medical editors, Oxford, UK (November, 2015)
- Generic Instructor Course, Resuscitation Council, UK (October, 2012)
(note: I subsequently teach as an instructor on this course as well)

1.2 Registrations

General Medical Council (UK)	Specialist Register Emergency Medicine	Jul 2011
Health Professions Council of South Africa	Specialist Register Emergency Medicine	May 2008
Health Professions Council of South Africa	Registered for independent practice	Jan 2002
Health Professions Council of South Africa	Registered for community service	Jan 2001
Health Professions Council of South Africa	Registered for internship	Jan 2000

2. Positions

2.1 Current positions

<i>From</i>	<i>To</i>	<i>Institution</i>	<i>Position</i>	<i>Department</i>
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Jan 2018	Current	Yeovil District Hospital NHS Foundation Trust	Consultant	Emergency department
Jan 2018	Current	University of Cape Town	Associate professor	Division of Emergency Medicine
Jan 2011	Current	African Federation of Emergency Medicine	Editor in Chief	African Journal of Emergency Medicine

2.1 Positions held

<i>From</i>	<i>To</i>	<i>Institution</i>	<i>Position</i>	<i>Department</i>
Jul 2014	Dec 2017	University of Cape Town	Senior lecturer	Division of Emergency Medicine
Jul 2014	Dec 2017	Khayelitsha Hospital	Consultant (volunteer)	Emergency Medicine
Nov 2011	Jun 2014	Plymouth Hospitals NHS trust, UK	Consultant	Emergency Medicine
Jan 2005	Jun 2014	University of Cape Town	Honorary lecturer/ Executive committee (ex officio)	Division of Emergency Medicine
Feb 2008	Oct 2011	Plymouth Hospitals NHS trust, UK	Associate Specialist	Emergency Medicine
Jul 2006	Jan 2008	Plymouth Hospitals NHS trust, UK	Staff Grade	Emergency Medicine
Oct 2005	May 2006	Morecambe Bay Hospitals NHS trust, UK	Locum staff grade	Emergency Medicine
Aug 2005	Sep 2005	Morecambe Bay Hospitals NHS trust, UK	Locum staff grade	Emergency Medicine
Jan 2004	Jun 2005	GF Jooste Hospital, Western Cape, SA	Principal Medical Officer and HOD	Emergency Medicine
Jul 2002	Dec 2003	Groote Schuur Hospital, Western Cape, SA	Senior Medical Officer	Emergency medicine, Cardiology, Cardiac ICU, Respiratory unit and Respiratory ICU
Jan 2002	Jun 2002	Victoria Hospital, Western Cape, SA	Senior Medical Officer	Emergency Medicine

Jan 2001	Dec 2001	GF Jooste Hospital, Western Cape, SA	Community service Medical Officer	Emergency Medicine
Jan 2000	Dec 2000	Cecelia Makiwane Hospital, Eastern Cape, SA	Intern	Paediatrics, Obstetrics, Surgery, Anaesthetics and Orthopaedics

3. Teaching and Learning

3.1 Undergraduate coursework or supervision

My current undergraduate load is limited to evaluations and teaching as directed through the Yeovil District Hospital Academy. I had a lower undergraduate teaching load than a postgraduate load in my University of Cape Town role. I had a more substantial undergraduate medical student teaching load during my time at Derriford. This is detailed below:

Student feedback:

- “Thank you so much for both running a very cool SSM and for looking after us so well”, Josh Fieggen (2016)
- “Thank you Dr Bruijns, you made it so easy”, Caleb Langton (2016)
- “Thank you so much Dr Bruijns, this would not have been possible without your incredibly valuable guidance”, Suniti Sinha (2016)

3.2 Postgraduate coursework

Although I am not involved in formal clinical training of specialist trainees, I am involved in teaching on the shop floor during clinical duties. Teaching is mostly bedside micro-teaching and short group teaching sessions which include all staff groups. I have also undertaken to establish an education WhatsApp group and manage the staff and learning notice board.

I am also a clinical supervisor and am busy completing the training for the educational supervision.

I have taught on the following courses over the last four years

<i>Year</i>	<i>Course</i>	<i>My specific contributions</i>
2017	MPhil Clinical	Pre: Updating material and references from 2016 course feedback,
Students	emergency care	mentoring new paediatric section lead, setup of course WhatsApp
enrolled: 17	convenor	group, setting assignments
Wrote exam:	(co-convened with	Intra: Response to weekly forum, fortnightly teleconference, contact
14	Dr. Katya Evans)	day programme and lectures, continuous coordination, marking
Students		assignments and feedback, setting exam

passed: 12		Post: Marking exam and feedback to students, programme feedback
2016	MPhil Clinical emergency care convenor	Pre: Updating material and references from 2015 course feedback, setting assignments
Students enrolled: 11		Intra: Response to weekly forum, fortnightly teleconference, contact day programme and lectures, continuous coordination, marking assignments and feedback, setting exam
Wrote exam: 7	(co-convened with Dr. Baljit Cheema)	
Students passed: 6		Post: Marking exam and feedback to students, programme feedback
2015	MPhil Clinical emergency care convenor	Pre: Complete redesign of module, setting assignments
Students enrolled: 8		Intra: Response to weekly forum, fortnightly teleconference, contact day programme and lectures, continuous coordination, marking assignments and feedback, setting exam
Wrote exam: 5	(co-convened with Dr. Baljit Cheema)	
Students passed: 4		Post: Marking exam and feedback to students, programme feedback

Student feedback:

- “Every lecture given by Stevan was excellent! He made concepts easy to understand. Honestly one of the best lecturers I've had”, 2017
- “Stevan definitely (sic) motivates the students to want to do better and do better for the healthcare sector. His passion for healthcare rubs off on students. His feedback was always constructive and fair. Thank you for making every contact session/ teleconference an absolute pleasure!”, 2017
- “He is the "coolest" lecturer I have so far come across in the programme! He is very approachable, and very responsive as well”, 2016
- “Feedback comments directly on the submitted assignment allows you to see exactly where you went wrong and in some cases right! This was particularly helpful to ensure your understanding of readings was interpreted correctly and you didn't miss the entire point of the topic. It was relevant and helpful”, 2016
- “He is very enthusiastic, stimulates the students to think, and inspires the students by considering their viewpoints even when those viewpoints are not absolutely correct. His believe in me as student motivated me to work even harder!”, 2016
- “Stevan is funny and engaging, and I loved his contact session. He is thorough and interesting, and I was inspired by his passion for African Emergency Medicine”, 2015

3.3 Personal supervision of masters dissertations and PhD theses

Division dissertation outputs are summarised here: <http://www.emct.info/emct-research-outputs.html>

Completed/ passed

1. Heinrich Weeber. Estimated trauma-associated blood loss versus availability of emergency blood products at a district-level public hospital in Cape Town (MSc) – 2017 * *distinction/ published/ poster presentation*
2. Kirsty Cohen. Patient waiting times within public Emergency Centres in the Western Cape: describing key performance indicators with respect to waiting times within Western Cape Emergency Centres in 2013-2014 (MPhil) – 2017 * *published/ poster presentation*
3. David Morris. Utilisation of emergency blood in a cohort of emergency centres in Cape Town, South Africa (MMed) – 2017 * *submitted for publication*
4. Sian Geraty. Adverse event registry analysis of an ems system in a low resource setting: a descriptive study (MMed) – 2017 * *submitted for publication*
5. Diulu Kabongo. Describing final diagnosis and outcome for patients investigated for suspected acute coronary syndrome at a regional, public South African emergency centre (MMed) – 2017 * *published/ poster presentation*
6. Jacobus Wiese. Poor adherence to Tranexamic acid guidelines for adult, injured patients presenting to a district, public, South African hospital (MMed) – 2017 * *distinction/ published/ poster presentation*
7. Alyshah Alibhai. Describing and comparing the availability of acute care resources to treat major trauma in different income settings: a self-reported survey of acute care providers at the 2016 International Conference on Emergency Medicine (MMed) – 2017 * *poster presentation*
8. Emmanuel Ahiabile. Describing the Categories of People that Contribute to an Emergency Centre Crowd at Khayelitsha Hospital, Western Cape, South Africa (MSc) – 2017 * *published/ poster presentation*
9. Crispin Kibamba. A Retrospective, Descriptive Study of ECG Patterns and Survival to Discharge of Patients Thrombolysed for ST Elevation Myocardial Infarction at a Provincial level-Public Hospital in Cape Town (MMed) – 2017
10. Johard Beukes. Describing and comparing the availability of acute care resources to treat acute coronary syndrome in different income settings: a self-reported survey of acute care providers at the 2016 International Conference on Emergency Medicine (MMed) – 2017 * *published/ poster presentation*
11. Yaseen Khan, Comparative, cross-sectional study describing agreement and accuracy of emergency centre triage using either a mobile application or manual triage (MMedSci) – 2016
12. Megan Banner. Exploring the factors underlying successful publication after participation in an Author Assist service (MSc) – 2016
13. Enrico Dippenaar. An investigation into the development, validation and implementation of a modified

triage system specific to Mediclinic Middle East (PhD) – 2016

14. Rob Kalebka. A survey of attitudes towards patient substance abuse and addiction in the Emergency Centre (MMed) – 2013 **published*

Submitted for examination

15. Simpiwe Sobuwa. A critical realist study into the emergence and absence of academic success among students enrolled for the Bachelor of Emergency Medical Care in South Africa (**PhD**)

Post ethics approval

16. Marlin Abrams. Publication rates of abstracts presented at the 1st and 2nd African Conference of Emergency Medicine (MMed)
17. Ramadhan Chunga. Describing and comparing the availability of acute care resources to treat new onset stroke in different income settings: a self-reported survey of acute care providers at the 2016 International Conference on Emergency Medicine (MMed) – **poster presentation*
18. Vanessa Naidoo. Describing the most common presenting complaints, their priority and corresponding diagnoses at Khayelitsha Emergency Centre (MMed)
19. Vanessa Naidoo. Describing the most common presenting complaints, their priority and corresponding diagnoses at Mitchells Plain Emergency Centre (MPhil)
20. Andrew Makkink. A study of emergency centre staff and prehospital provider opinions on current handover practices within the greater Johannesburg area (**PhD**)
21. Abdelmonim Abdelrahman. Evaluation of the use of Social Media in facility-based emergency care in low-resource settings (**PhD**)
22. Murad Al Hamzy. A descriptive study of access to the 500 most cited emergency medicine papers from the last 5 years (MMed)
23. Ushira Ganas. Descriptive Study of the current use of focused emergency cardiac ultrasound at District Level Hospital Emergency Centres in the Western Cape (MMed)
24. Marlon Willemse. Describing the research output in African Emergency Care publications in terms of collaboration, quantity and citation impact (MMed)
25. Melisandre Goncalves. Evaluation of the management of closed fractures of forearm and wrist in the emergency centre of a public district hospital (MPhil)

Student feedback

"I know you are really busy but I have recommended you as the ideal supervisor to registrars that still have their research projects ahead of them. I have had a few friends who haven't had supervisors like you and who have really suffered as a result, and I am really, really appreciative of who you are and all you have done for me in this"

"It's no secret that most Emergency Medicine Registrars would choose you as their supervisor, if they could. It's not just for your academic strengths though. They've seen that you really care for your students and always seem willing to go the extra mile. I've experienced it first hand"

"He also supported me by paying for me to present a poster at the 3rd African Conference on Emergency Medicine (AfCEM) in Cairo from 9-11 November 2016. Furthermore, through his efforts I was sponsored to attend trauma and injury research in Africa Workshop from 10-12 November 2016 which was organised by Newton Fund in Cairo, Egypt"

"Dr Bruijns was not only a supportive mentor, he was compassionate and empathetic during times of academic and personal difficulty. Though he manages an extensive student portfolio, he always finds time to engage one-on-one in a meaningful and constructive manner"

"Indeed, as a supervisor, you offered sufficient guidance to show the way to quality medical research. Your efforts have inspired me to continue medical research beyond the requirement of an MMED report"

3.4 External examining at undergraduate level

1. Since 9 February 2016: College of Medicine, University of Malawi, Blantyre, Malawi (for three years)
Examined 24-27 May 2016 and 23-26 May 2017

3.5 External examining of dissertations/theses or post-graduate examinations

1. Muhimbili University of Health and Allied Sciences, Dar es Salaam, Tanzania (dissertations and clinical)
Examined 4-8 September 2016 and 28-31 Augustus 2017. Due to examine in August 2018.
2. University of Botswana, Gaborone, Botswana (dissertations, for two years)
Examined 26 June 2017

3.6 Adult/community education

1. *South African Triage Scale*

I was the chair of the Western Cape Government triage committee tasked with the South African Triage Scale roll-out within the province. The course aims to empower emergency centre nurses to sort patients according to illness/ injury priority. My own research has shown that use of the South African Triage Scale is

associated with a significant reduction in mortality and morbidity.

2. *Research training*

See conference workshops

4. Research

4.1 Articles in peer-reviewed journals

4.1.1 International

1. Kabongo D, Kalla M, Allgaier R, Bruijns S. Describing suspected non ST-elevation acute coronary syndrome using troponin at a regional, public South African emergency centre with the Roche cardiac reader. *SA Heart Journal*. 2018;15(2):102-7
2. Cohen K, Bruijns S. Describing key performance indicators for waiting times in emergency centres in the Western Cape Province, South Africa, between 2013 and 2014. *South African Medical Journal*. 2018;108(7):579-84
3. Estimated injury-associated blood loss versus availability of emergency blood products at a district-level public hospital in Cape Town, South Africa. *Afr J Emerg Med*. 2018;8(2):69-74
4. Beukes JG, Hendrikse C, Bruijns SR. Lack of Acute Care Resources to Diagnose and Treat Acute Coronary Syndrome in Lower-Income Settings. *Global heart*. 2018;13(1):35.
5. Bruijns S, Lamanna C. The case for a regional approach to publication impact. *ecancermedicalscience*. 2018;12. <https://doi.org/10.3332/ecancer.2018.ed78>
6. Bruijns SR, Maesela M, Sinha S, Banner M. Poor Access for African Researchers to African Emergency Care Publications: A Cross-sectional Study. *Western Journal of Emergency Medicine*. 2017;18(6):1018
7. Bruijns SR, Banner M, Jaquet G. Improving Publication Quality and Quantity for Acute Care Authors from Low- and Middle-Income Settings. *Ann Emerg Med*. 2017;69(4):462-8
8. Ahiabile E, Lahri S, Bruijns SR. Describing the categories of people that contribute to an Emergency Centre crowd at Khayelitsha hospital, Western Cape, South Africa. *Afr J Emerg Med*. 2017; DOI: <http://dx.doi.org/10.1016/j.afjem.2017.04.004>
9. Wiese JGG, Van Hoving DJ, Hunter L, Lahri S, Bruijns SR. Poor adherence to Tranexamic acid guidelines for adult, injured patients presenting to a district, public, South African hospital. *Afr J Emerg Med*. 2017; DOI: <https://doi.org/10.1016/j.afjem.2017.04.006>
10. Callachan EL, Alsheikh-Ali AA, Chandrasekhar-Nair S, Bruijns S, Wallis LA. Outcomes by Mode of Transport of ST Elevation MI Patients in the United Arab Emirates. *West J Emerg Med*. 2017;18(3):349-355
11. Vassallo J, Smith JE, Bruijns SR, Wallis LA. Major incident triage: a consensus-based definition of the essential

- life-saving interventions during the definitive care phase of a major incident. *Injury*. 2016;47(9):1898-902
12. Callachan EL, Alsheikh-Ali AA, Bruijns S, Chandrasekhar-Nair S, Wallis LA. Utilization and perceptions of emergency medical services by patients with ST-segment elevation myocardial infarction in Abu Dhabi: a multicentre study. *Heart Views*. 2016;17(2):49-54
 13. Callachan EL, Alsheikh-Ali AA, Bruijns SR, Wallis LA. Physician perceptions and recommendations about pre-hospital emergency medical services for patients with ST-elevation acute myocardial infarction in Abu Dhabi. *Journal of the Saudi Heart Association*. doi:10.1016/j.jsha.2015.05.005
 14. Bruijns SR, Guly HR, Wallis LA. Vital signs during and following ambulance transfer. *Eur J Emerg Med*. 2014;21(2):136-8
 15. Bruijns SR, Guly HR, Bouamra O, Lecky F, Wallis LA. The value of the difference between ED and prehospital vital signs in predicting outcome in trauma. *Emerg Med J* 2014;31(7):579-82
 16. Bruijns SR, Guly HR, Bouamra O, Lecky FE, Wallis LA. Heart rate and systolic blood pressure in patients with minor to moderate, non-haemorrhagic injury versus normal controls. *Emerg Med J*. 2013 Nov;30(11):901-5
 17. Bruijns SR, Guly HR, Wallis LA. Effect of spinal immobilisation on heart rate, blood pressure and respiratory rate. *Prehosp Disaster Med*. 2013 Jun;28(3):210-4
 18. Bruijns SR, Guly HR, Bouamra O, Lecky F, Wallis LA. The value of traditional vital signs, shock index and age-based markers in predicting trauma mortality. *J Trauma Acute Care Surg*. 2013 Jun;74(6):1432-7
 19. Kalebka RR, Bruijns SR, Van Hoving DJ. A survey of attitudes towards patient substance abuse and addiction in the Emergency Centre. *African Journal of Emergency Medicine*. 2013;3(1):10-7 (citations 1; views 5456)
 20. Bruijns SR. Data protection of images taken in the emergency department made easy with a webcam. *Emerg Med J*. 2011 Nov;28(11):997
 21. Bruijns SR, Hicks A. Achalasia: An unusual Cause of Airway Obstruction. *Emerg Med J*. 2009;26:148
 22. Bruijns SR, Engelbrecht D, Lubinga W, Wells M, Wallis LA. Penetrating the acoustic shadows: Emergency ultrasound in South African emergency departments. *S Afr Med J*. 2008;98:932-4
 23. Bruijns SR, Burch VC, Wallis LA. A prospective evaluation of the Cape triage score in the emergency department of an urban public hospital in South Africa. *Emerg Med J*. 2008;25:398-402
 24. Bruijns SR, Burch VC, Wallis LA. Effect of introduction of nurse triage on waiting times in a South African emergency department. *Emerg Med J*. 2008;25:395-7
 25. Gottschalk SB, Wood D, De Vries S, Wallis LA, Bruijns S, On behalf of the Cape Triage Group. The Cape Triage Score: a New Triage System for South Africa. Proposal from the Cape Triage Group. *Emerg Med J* 2006;23:149-153

4.1.2 Local

1. Wallis LA, Gottschalk SB, Wood D, Bruijns S, De Vries S, Balfour C: The Cape Triage Score - a Triage System for

4.2 Books (authored or edited)

1. Twomey M, Louw P, Bruijns SR: South African Triage Scale, Instructor Manual. 2nd Edition, 2016
2. Bruijns S, Gottschalk SB, De Vries S, Haas DS: Cape Triage Score, Hospital Provider Manual. 1st Edition, 2005

4.3 Chapters in books

1. Bruijns SR, section editor: internal medicine: Welzel T, editor. Emergency Medicine Guidance for the Western Cape. Cape Town: ISBN: 9780620629423, 2016
2. Bruijns SR, section editor: emergency dermatology in: Wallis LA, Reynolds TA, editors. AFEM handbook of acute and emergency care. Cape Town: Oxford University Press Southern Africa, 2013. ISBN: 9780199056071

4.4 Peer-reviewed conference presentations

4.4.1 International

- 1 Cairo, Egypt, African Conference on Emergency Medicine 2016
 - Wiese JGG, Van Hoving DJ, Hunter L, Lahri S, Bruijns SR. Poor adherence to Tranexamic acid guidelines for adult, injured patients presenting to a district, public, South African hospital (poster)
 - Ahiabile E, Lahri S, Bruijns SR. Describing the categories of people that contribute to an Emergency Centre crowd at Khayelitsha hospital, Western Cape, South Africa (poster)
 - Weeber H, Hunter L, Van Hoving DJ, Bruijns SR. Estimated trauma-associated blood loss versus availability of emergency blood products at a district-level public hospital in Cape Town (poster)
 - Beukes J, Hendrikse C, Bruijns SR. Describing and comparing the availability of acute care resources to treat acute coronary syndrome in different income settings: a self-reported survey of acute care providers at the 2016 International Conference on Emergency Medicine (poster)
 - Paul Muganda, Hendrikse C, Bruijns SR. Describing and comparing the availability of acute care resources to treat sepsis in different income settings: a self-reported survey of acute care providers at the 2016 International Conference on Emergency Medicine (poster)
 - Alyshah Alibhai, Bruijns SR, Hendrikse C. Describing and comparing the availability of acute care resources to treat major trauma in different income settings: a self-reported survey of acute care providers at the 2016 International Conference on Emergency Medicine (poster)
 - Ramadhan Chunga, Bruijns SR, Hendrikse C. Describing and comparing the availability of acute care resources to treat new onset stroke in different income settings: a self-reported survey of acute care

providers at the 2016 International Conference on Emergency Medicine (poster)

2 Cape Town, South Africa, International Conference on Emergency Medicine 2016

- Bruijns S. There has been an awakening; publication sources in African emergency care. F1000Research 2016, 5:1140 (poster) (doi: 10.7490/f1000research.1112098.1)
- Bruijns S. Emergency medicine publication impact and habits between different. F1000Research 2016, 5:1139 (poster) (doi: 10.7490/f1000research.1112097.1)
- Bruijns S. Collaboration in African emergency care research, quality and quantity of publications. F1000Research 2016, 5:1138 (poster) (doi: 10.7490/f1000research.1112096.1)
- Makkink A, Stein C, Bruijns S and Gottschalk S. Emergency Centre handover: what is actually important? F1000Research 2016, 5:1404 (poster) (doi: 10.7490/f1000research.1112351.1)

3 Addis Ababa, Ethiopia, African Conference on Emergency Medicine 2014

- Bruijns SR, Guly HR, Bouamra O, Lecky FE, Wallis LA. Heart rate and systolic blood pressure in patients with minor to moderate, non-haemorrhagic injury versus normal controls (poster)
- Bruijns SR, Guly HR, Wallis LA. Effect of spinal immobilisation on heart rate, blood pressure and respiratory rate (poster)
- Bruijns SR, Guly HR, Bouamra O, Lecky F, Wallis LA. The value of traditional vital signs, shock index and age-based markers in predicting trauma mortality (poster)
- Bruijns SR, Guly HR, Bouamra O, Lecky F, Wallis LA. The value of the difference between ED and prehospital vital signs in predicting outcome in trauma (poster)

4 Exeter, UK: College of Emergency Medicine UK annual scientific meeting (9 to 11 September 2014)

- House RH, Bruijns SR, Smith JE. Winning the RAT race: The Impact of a Rapid Assessment and Treatment Service (RATS) on Emergency Department Flow and Performance (poster)

4.4.2 Local

1 Cape Town, South Africa, eResearch conference 2017

- Bruijns SR, Banner M, Jaquet G. Improving Publication Quality and Quantity for Acute Care Authors from Low- and Middle-Income Settings (poster)
- Banner M, Jaquet G, Bruijns SR. Identifying, understanding, and addressing challenges faced by authors publishing Emergency Medicine research in sub-Saharan Africa (poster)
- Bruijns SR, Maesela M, Sinha S, Banner ME. Poor local access to African emergency care publications without publisher subscription, a cross-sectional study (poster)

4.6 Non-peer-reviewed articles in journals

1. Bruijns SR, Wallis LA. The Kampala Trauma Score has poor diagnostic accuracy for most emergency presentations. *Injury*. 2017;48(10):2366-7
2. Bruijns SR, Louw P, Kuiler A, Esterhuysen E, Magerman Y. Standardised training is the key to accuracy in triage. *S Afr Med J* 2017;107(7):546
3. Bruijns S. 2016 International Conference on Emergency Medicine Abstracts. *Academic Emergency Medicine*. 2017;24(4):500
4. Dippenaar E, Bruijns S. Triage is easy, said no triage nurse ever. *International Emergency Nursing*. 2016;29:1-2
5. Bruijns SR. Junk food and the rise of acute coronary syndrome in Africa. *Afr J Emerg Med*. 2013;3(3):101
6. Bruijns SR, Wallis LA. Submission for publication made easy. *Afr J Emerg Med*. 2013;3(2):49
7. Bruijns SR, Wallis LA. The rise of the frequent attender. *Afr J Emerg Med*. 2012;2(4):141-2
8. Jacquet G, Levine A, Bruijns SR, Wallis LA. Global Emergency Medicine Literature Review, Tanzania and adopting delegates. *Afr J Emerg Med*. 2012;2(3):95-6
9. Bruijns SR, Green R, Wallis LA. Sepsis as a cause of rising health care casualties in Africa. *Afr J Emerg Med*. 2012;2(2):47-8
10. Brysiewicz P, Bruijns SR, Wallis LA. Pepper soup for the emergency care workers' soul (a remedy for the annual end of year festive paradigm). *Afr J Emerg Med*. 2011;1(4):145-6
11. Yusuf S, Bruijns SR. Abstracts: International research. *Afr J Emerg Med*. 2011;1(3):104-7
12. Bruijns SR. Abstracts: Development of Emergency Medicine in the world's developing regions. *Afr J Emerg Med*. 2011;1(3):99-100
13. Bruijns SR, Wallis LA. A dual-language policy for the African Journal of Emergency Medicine. *Afr J Emerg Med*. 2011;1(3):97-8
14. Bruijns SR, Wallis LA. Emergency medicine, an opportunity to re-imagine a speciality in Africa. *Afr J Emerg Med*. 2011;1(2):49-50
15. Bruijns SR, Wallis LA. Africa should be taking responsibility for emergency medicine in Africa. *Afr J Emerg Med*. 2011;1(1):1-2

4.6 Other contributions/ reports

1. Wells M, Bruijns SR, On behalf of the College of Emergency Medicine of South Africa. Emergency Ultrasound in South Africa, Part 1- Credentialing for Emergency Ultrasound. Available at: <http://www.collegemedsa.ac.za> (Accessed: 10 November 2010)

2. Wells M, Bruijns SR, On behalf of the College of Emergency Medicine of South Africa. Emergency Ultrasound in South Africa, Part 2- Emergency Ultrasound Resource Document. Available at: <http://www.collegemedsa.ac.za> (Accessed: 10 November 2010)

4.7 Research: invited scholarly presentations at congresses

4.7.1 International

<i>Year</i>	<i>Organisation</i>	<i>Invited presentation topic</i>
2016	African Conference on Emergency Medicine, Cairo, Egypt	– How to get your emergency medicine research published
2016	European Congress on Emergency Medicine 2016, Vienna, Austria	– Diary of a wimpy journal - lessons from navigating publication adolescence
2016	International Conference on Emergency Medicine, Cape Town	– Conducting emergency care research in low resource settings
2016	Swedish Society for Emergency Medicine Conference, Sweden	– Starting a journal in a research naive setting – Research with limited resources, there is an app for that – Innovations in emergency medicine in South Africa: making the most of what you have
2015	World Congress on Disaster and Emergency Medicine, Cape Town	– Research, resourcefulness and resources
2015	Global Health Conference, Botswana	– Research, resourcefulness and resources

4.7.2 Local

<i>Year</i>	<i>Organisation</i>	<i>Invited presentation topic</i>
2017	Emergency Medicine Society of South Africa conference, Sun City	– Research workshop
2016	Emergency Care Society of South Africa conference, Cape Town	– The most important skill you'll need to be successful in research- critical thinking
2016	Brave African Discussions in Emergency Medicine symposium	– End of life care ≠ end of health care
2013	Emergency Medicine Society of South Africa	– Cutting edge clinical conundrums (session chair)

conference, Cape Town

- Trauma in the elderly
- Emergency thoracotomy (session chair)

2011 Emergency Medicine in the Developing
World Conference, Cape Town

- Trauma plenary (session chair)
- The point of an African EM Journal
- Publishing in the African Journal of Emergency
Medicine

2009 Emergency Medicine in the Developing
World Conference, Cape Town

- Levels of evidence
- Emergency Ultrasound: Interactive debate (session
chair)

4.7.3 Refresher/educational courses or workshops

- Please see 3.6 for details on South African Triage Scale instructor courses. Courses were held during 2016: 17 to 18 August, 14 to 15 September, 12 to 13 October and 16 to 17 November
- Research workshop (in-conference), African Conference on Emergency Medicine, Cairo, Egypt, 2016
- Research workshop (pre-conference), International Conference on Emergency Medicine, Cape Town, South Africa, 2016
- Research workshop (pre-conference), Swedish Society for Emergency Medicine Conference, Sweden, 2016
- Elsevier author workshop, University of Cape Town, Cape Town, South Africa, 2015
- ECG workshop (pre-conference), African Conference on Emergency Medicine, Addis Ababa, Ethiopia, 2014
- Research workshop: Publish or perish (pre-conference), Emergency Care Society of South Africa conference, Maropeng, South Africa, 2014

4.7.4 Conference organising

I have served/ am serving on the local organising committee of the following conferences. Duties included general planning and to a large extent fundraising to provide access to underprivileged delegates from lower-middle or low-income African states (also referred to as Support-a-Delegate, or Supadel). Please see 6.2 for more detail on this. The conferences are:

- 2017 Emergency Medicine Society of South Africa conference, Sun City
- 2016 African Conference on Emergency Medicine, Cairo Egypt
- 2016 International Conference on Emergency Medicine, Cape Town
- 2015 World Congress on Disaster and Emergency Medicine, Cape Town

- 2014 African Conference on Emergency Medicine, Addis Ababa, Ethiopia
- 2013 Emergency Medicine Society of South Africa conference, Cape Town
- 2012 African Conference on Emergency Medicine, Accra, Ghana
- 2011 Emergency Medicine in the Developing World Conference, Cape Town
- 2009 Emergency Medicine in the Developing World Conference, Cape Town
- 2007 Emergency Medicine in the Developing World Conference, Cape Town

4.9 Other Research activities

4.9.1 Research funding

Institutional

- URC travel grant to attend the 2017 Emergency Medicine Society of South Africa conference (value R6500)
- URC travel grant to attend the 2016 African Conference on Emergency Medicine (value R10 000)
- URC travel grant to attend the 2015 World Congress on Disaster and Emergency Medicine (value R10 000)
- Early Career Researcher grant 2015 (value R35 000)

National

- NRF Thuthuka 2016 (Simpiwe Sobuwa, Ph.D. student, main applicant): I supervise Simpiwe on his Ph.D. (value: R 6000)
- NRF rated researcher: Y2 (since 2016) (value: R40 000 pa for 5 years)
- DST - NRF conference fund (Prof Wallis main applicant): For 2016 International Conference on Emergency Medicine. The application was largely built on the back of the Supadel programme (value: R400 000)
- NRF Innovation Masters Scholarship for 2015 (Emmanuel Ahiable, MSc student, main applicant): I supervised Emmanuel on his MSc (value: R80 000). It could not have happened to a nicer guy.

International

- Newton Researcher Links Workshop Grant (SA-EGY-UK Trilateral - July 2015): For the 2016 African Conference on Emergency Medicine (value: GBP 33,600, ±ZAR 585,000)
- Fogarty grant 2016 (Bhakti Hansoti, Ph.D. student, main applicant): I was the local principal investigator for the project funded by this grant (value: USD 22,000, ±ZAR 295,000)
- Fogarty grant 2016: to attend a mentorship workshop in Johannesburg (value: R25 000)

4.9.2 Refereeing for international journals

(Citescore rank in bold refers to a ranking within the first quartile of journals included in the category)

- South African Medical Journal (last review request 30/05/2017)
Citescore: 0.66; citescore rank: 1,236/2,156
- Applied Clinical Informatics (last review request 07/05/2017)
Citescore: 1.39; citescore rank: 217/511
- Academic Emergency Medicine (last review request 24/04/2017)
Citescore: 2.32; **citescore rank: 6/75**
- European Journal of Emergency Medicine (last review request 29/06/2017)
Citescore: 1.38; **citescore rank: 13/75**
- Injury journal (last review request 25/11/2016)
Citescore: 2.03; **citescore rank: 7/75**
- Journal of Clinical Nursing (last review request 29/08/2016)
Citescore: 1.57; **citescore rank: 11/97**
- Emergency Medicine Journal (last review request 03/07/2016)
Citescore: 1.11; citescore rank: 19/75
- Journal of Critical Care (last review request 29/05/2016)
Citescore: 2.20; **citescore rank: 15/81**
- Prehospital Emergency Care (last review request 05/05/2016)
Citescore: 2.38; **citescore rank: 5/75**
- International Journal of Environmental Research and Public Health (last review request 16/03/2016)
Citescore: 2.38; citescore rank: **67/446**

4.9.3 Refereeing for organisations (publishers, funders, etc.)

- National research Foundation (last review request 06/07/2017)
- Elsevier book reviews (last review request 21/02/2016)
- University of Cape Town, Human Research Ethics Committee Fast track review (last review request 07/07/2017)

4.9.4 Examination of postgraduate theses

Please see 3.5 for external examination of theses

4.9.5 Creative work (grey literature)

Outputs:

- Bruijns SR. Codependency and the Emergency Clinician. St Emlyn's blog. 2018; <http://stemlynblog.org/codependency-and-the-emergency-clinician-st-emlyn/>
- Bruijns SR. Is there anything else I need to know? Working in Africa. St Emlyn's blog. 2018; <http://stemlynblog.org/anything-else-need-know-working-africa/>
- Bruijns SR. How access to knowledge can help universal health coverage become a reality. The Conversation. 2017; <https://theconversation.com/how-access-to-knowledge-can-help-universal-health-coverage-become-a-reality-79126>

(This article has been republished in The Wire, IOL and AllAfrica.com. It has garnered over 1000 reads since publication on 29 June 2017, been tweeted 56 times, shared on Facebook 72 times and on LinkedIn 17 times)

- Bruijns SR. The altruistic author: making your research visible without breaking the bank or the law. Global Emergency Medicine Academy blog. 2017; <http://saem.org/gema/publications/gema-member-blogs>
- Bruijns SR. There is no standard like gold standard. #bad-EM blog. 2016; <http://badem.co.za/there-is-no-standard-like-gold-standard/>
- Bruijns SR. Why emergency care in Africa needs to become a specialised course. The Conversation. 2016; <https://theconversation.com/why-emergency-care-in-africa-needs-to-become-a-specialised-course-56730>

(This article has been republished in Flipboard and by the University of Cape Town. It has garnered over 2400 reads since publication on 29 June 2017, been tweeted 98 times, shared on Facebook 409 times and on LinkedIn 91 times)

- Bruijns SR. The Best of AfJEM. Emergency Medicine News & Articles, Emergency Physicians International. 2014; <http://www.epijournal.com/articles/128/the-best-of-afjem>
- Bruijns SR. Supporting African EM Just Got a Lot Easier. Emergency Medicine News & Articles, Emergency Physicians International. 2014; <http://www.epijournal.com/articles/114/supporting-african-em-just-got-a-lot-easier>
- Twitter handle: [@codingbrown](#) (personal), [@AfJEM](#) (editor of African Journal of Emergency Medicine) and [@go_supadel](#) (on behalf of Supadel)
- Facebook: <https://www.facebook.com/AfJEM>

4.9.6 Media Releases, Appearances or Interviews

- Moore K. Open up access to advance healthcare. University of Cape Town News. 2018; <https://www.news.uct.ac.za/article/-2018-02-07-open-up-access-to-advance-healthcare>
- Smart P. The challenges of publishing a journal in the LMICs. LinkedIn Pulse. 2017; <https://www.linkedin.com/pulse/challenges-publishing-journal-lmics-pippa-smart>
(I am the editor referred to in the article)
- Emergency medicine in SA needs a lifeline. IOL Daily News. 2016; <http://www.iol.co.za/dailynews/news/emergency-medicine-in-sa-needs-a-lifeline-2011926>
(Interviewed by reporter for article)
- Stevan Bruijns; en av pionjärerna inom akademisk akutsjukvård i Sydafrika. 2016; <http://sweets.nu/stevan-bruijns-en-av-pionjarerna-inom-akademisk-akutsjukvard-i-sydafrika/> (the printed interview is in English)
- Bruijns SR. The Emergency Physician in Africa. Podcast. 2013; <http://harriscpd.co.uk/wordpress/archives/author/stevan>

5. Leadership and Management

5.1 Contribution to institutional activities

Currently

- Largely leadership within the emergency department to include governance, appraisals, complaints, safety, information technology, audit, research and environment
- I have also taken on simulation training in the ED
- I have also taken on co-convening the local human factor's course

Previously

- At the University of Cape Town, I have served as a member of the Division of Emergency Medicine's Academic executive committee, the Emergency Medicine Division Research Subcommittee chair, Ex-officio member of the Surgical Department Research Committee, and Professional Masters Committee.

5.2 Contribution to other leadership and/management activities/ initiatives

- Editor-in-chief – African Journal of Emergency Medicine (see <http://www.afjem.com/>)

Role: Day to day editing, allocation and management of the workflow (editors and reviewers), issue planning, copy-editing, advertising and issue compilation

Contribution: My aim has been focussed on achieving indexing with the Department of Higher Education and Technology, Medline (PubMed) and the Science Citation Index (impact factor). This required a focus on the qualitative and quantitative growth of the journal. The African Journal of Emergency Medicine is currently

the only emergency care text from Africa. It outpaces other, stronger international journals on publishing African emergency care content; it published 20% of all African emergency care outputs of the last five years, with 46 other journals having published the rest. Qualitative and quantitative indices have grown substantially and the African Journal of Emergency Medicine is currently a second quartile journal on international rankings. It was indexed in 2016 with the Department of Higher Education and Technology, and the Emerging Science Citation Index (the last step before impact factor allocation). Indexing is a challenging beast for regional journals from low- or middle-income countries. My efforts was recently used as an example of these challenges in a recent blog post listed in 4.9.8). Although a large proportion of our authors are non-African, this demographic is shifting towards greater African representation. I have moved towards stronger African representation on the editorial board as well. Through careful negotiation with our society, the African Federation for Emergency Medicine and the publisher we have managed to maintain a hybrid open access journal (free to access, free to publish). This not only helped provide access for an African audience but also for African researchers. We employ a journal based mentorship scheme to help struggling authors (Author Assist). I have published on the latter (see 4.8) and it is also described in the social responsiveness section (see 6.2). I recently introduced an English, Arabic and French blog, in order to encourage diversity. This has proven very popular amongst readers.

(note: this is not a remunerated role and I engage in this work outside of my regular UCT contracted hours)

- Chair – Western Cape Government Emergency Medical Services Triage committee (see <http://www.emct.info/triage.html>)

Role: Coordinating triage training in Western Cape public emergency centres

Contribution: Edited existing provider course material, co-authored instructor manual, co-convened instructor courses. Under my leadership the committee trained 317 providers, 27 instructors and 50 instructor candidates (will become full instructors after an observed course) over the space of a year.

(note: this is not a remunerated role and I engage in this work outside of my regular UCT contracted hours)

6. Social Responsiveness

6.1 Community outreach

Support a delegate (Supadel)

- Supadel (or support a delegate) is a unique African Federation for Emergency Medicine initiative that I founded and currently lead. It sponsors the attendance of delegates from low and middle-income countries at regional AFEM-affiliated conferences. The initiative has a very similar ethos to the UCT Faculty of Health Sciences's Impilo Student Bursary Fund. It has been operational since 2009, and in this time has allowed numerous Emergency Care providers without the financial means, to attend high-quality acute care conferences throughout the continent. It operates on a peer-to-peer sponsorship model: conference delegates or other donors financially support their peers from African low- and middle-income countries,

either by adding a sponsorship (usually as a proportion of their registration fee) to their conference registration fee or by donating securely online through one of two crowdfunding sites.

- To date Supadel has raised ZAR 1,797,500.00 to enable 205 delegates from 21 African countries and 5 low- and middle-income, non-African countries to attend one of nine emergency medicine conferences on African soil (including nurses, clinicians, and prehospital staff). Gender ratios were split equally with white delegates making up less than 3% of sponsored delegates. This was intentional, in order to focus the effort on native African delegates.
- Many Supadel alumni have used this opportunity to increase their involvement in African emergency care; two joined the executive board of the African Federation for Emergency Medicine this year. A large portion of the supernumerary trainees with the division are Supadel alumni. Supadel uplifts disadvantaged, African, emergency care staff and provides access to education in the form of conferences, but perhaps more importantly accessed the benefit of networking and forming collaborations.
- You can read more about Supadel, peruse the many comments from alumni or make a donation here: <http://www.afem.info/get-involved/support-a-delegate/?id=81>

Author Assist

- Author Assist (<http://www.afjem.com/author-assistance.html>) is a publication mentorship service for novice authors from low and middle-income countries that I found in my role as editor-in-chief of the African Journal of Emergency Medicine. It is the aim of the African Journal of Emergency Medicine to be representative of all parts of the African continent. I recognised fairly early in the journal's journey that many African emergency care researchers are disadvantaged in the available range of journals into which they can publish as well as lack the skills to present their research in an acceptable scientific format that deserves publication. So I devised Author Assist: following the rejection of interesting but poorly written manuscripts, AfJEM uses a team of experienced volunteers (Author Assistants) to help mentor and improve the quality of manuscripts before peer-review submission.
- Users of Author Assist are mainly black African researchers from elsewhere in Africa. The vast majority of resubmitted papers go on to be published- reversing 1 in every 4 reject decisions. I am proud to say that one Author Assist alumni is now an editor of the journal and another has recently published in one of the top three journals in emergency medicine.
- Author Assist uplifts disadvantaged, novice, African authors and provide them with the confidence to publish.
- See: <http://www.afjem.com/author-assist.html>

6.2 Honours, awards, prizes, nominations

Membership of the Order of St. Lazarus (Jul 2010)

The Order of Saint Lazarus is one of the most ancient of the European orders of chivalry. At the very least it dates back to the time of the Crusader knights. It is both a Military Order of Mercy and a Hospitaller Order dedicated to the care and assistance of the poor and the sick. Its aim is to guard, assist, succour and help the poor, the sick and dying,

- I was awarded membership for the following services: Supadel project lead (see 6.2) and compiling a state of Macedonian Acute Care Facilities report in 2007 for a UK charity (Running on wheels) to allow sourcing of appropriate medical equipment for use in these acute care services.

William Rutherford International Award nomination (June 2017)

This award by the Royal College of Emergency Medicine recognises the inspiring work of one of the specialty's 'founding fathers', William Rutherford. The award are made every four years to an individual or organisation that has conducted work that has had major humanitarian or public health benefit overseas. The work should have relevance to or direct involvement with Emergency Medicine.

- I was nominated for the following services: Supadel project lead (see 6.2), contribution to African emergency medicine scholarship through the African Journal of Emergency Medicine and Author Assist, and recognition for work done towards global triage research and education.

7. Important collaborations

- Collaboration with Stellenbosch University's Industrial Engineering division and the University of Cape Town's Library services in an attempt to derive a regional journal citation impact metric. This project will aim to describe journals in terms of their regional contribution, instead of global contribution as is currently the standard way of describing impact. We feel that such a metric will allow authors with outputs of a regional importance will be able to use the metric to select the journal with the best regional impact. No such metric currently exists. We will involve a masters student in the process.
- I am involved with the Sudan Research Foundation on a project to establish access to the Hinari Research for Life programme. We expect to show that the programme does not fulfil its mandate by providing reasonable access to global research. We will involve a masters student in the process.
- I am involved with the University of Saskatchewan (Canada) in an international education project entitled *podcast utilization by emergency medicine and critical care healthcare practitioners*. The project aims to describe uptake of educational podcast use in different parts of the world. My collaborating role extends to coordinating local data collection, analysis and co-authoring scholarly outputs. I have involved a female Ugandan specialist trainee in the project as well.
- Through my role as editor-in-chief of the only emergency care journal on the continent, I was asked to

collaborate with Elsevier through serving on the Elsevier Advisory Panel. The objective of this collaboration is to progress science through an open dialogue with the senior research community that resides within Elsevier.

- Through mentoring of one of the division's PhD students who is studying on a Fogarty grant I was involved in a public collaboration between the City of Cape Town, Western Cape Government and UJMT Fogarty Global Health Fellowship Programme. I was the local PI of the project: *Developing a Discriminator based Triage System for the Identification of Acutely ill or Injured Patients that Present to a Selection of Outpatient Clinics*. I coordinated two American research assistants in data collection and analysis of the data. This is currently being compiled for publication.
- Collaboration with the Trauma Audit Research Network (Prof Fiona Lecky) in publishing peer-reviewed articles resulted in the successful joint application for the Newton Researcher Links Workshop Grant (see research productivity below) representing universities from South Africa, Egypt and the United Kingdom. This grant allowed the funding of a research workshop at the 2016 African Conference on Emergency Medicine, held in Cairo, as well as attendance of the delegates to the workshop. This allowed me to nominate five candidates (including a South African female, a Ghanaian and a Congolese) to attend the workshop and conference.