



Fact Sheet for: Emergency Services-GMC Lawrenceville

Current as of 7/21/06

-Focus of unit: Emergency Care

-Departments within ER Services: CDU: Clinical Decision Unit/Chest Pain Center; Adult ER; CEC: Children's Emergency Center; FT: Fastrack; RME: Rapid Medical Evaluation.

-RN to patient ratio for each shift: Day ___:___ Evening ___:___ Night ___:___

CDU/Chest Pain Center- 1:4 Adult ER- 1:3/1:4 CEC- 1:4 Fastrack- 1:6 RME- 1:6 or 1:8

-Tech to patient ratio: Day ___:___ Evening ___:___ Night ___:___

CDU/Chest Pain Center- 1:12 Adult ER- 1:6 CEC- 1:6 Fastrack- 2:12

-Average # of (cases/patients/deliveries) per day:

CDU – 20 Adult ER – 110 CEC – 70 FT – 70

-Number of beds in unit:

GMC: Adult ER - A Hall: 9 beds including 1 negative airflow room. Trauma area: 2 Trauma Suites, 2 Critical Rooms, 1 Decontamination shower room with outside access. **B Hall:** 11 beds, 5 beds in holding/discharge preparation room, and 2 triage rooms.

Fastrack: 11 beds; **Children's Emergency Center:** 13 beds including 1 negative airflow room, 1 Treatment Room with Resuscitation Capacity; **Clinical Decisions Unit/Chest Pain Center:** 12 beds; Rapid Medical Evaluation: 3 beds.

Total Beds in Emergency Services: 60

-Average length of stay:

Adult ER: Discharge patients 3 to 4 hours; Admitted patients 4 to 6 hours; **CEC** – 2 hours; **Fastrack** – 3 hours

-Special equipment used in the department: Rapid infuser, Marquette Monitors, onsite X-ray, onsite ABG Lab, Puritan Bennett 7200 and transport ventilators, Eagle and Dash mobile cardiac monitors, bier blocks, crash carts, suture carts, splinting carts, OB carts, tube system, Pediatric carts with Broselow tape, bedside registration, EmSTAT (comprehensive computer documentation and patient tracking with Physician order/entry, all staff wear companion phones, syringe pump infuser.

-Patients admitted to the unit from: Doctors Office and self admit.

Medical conditions of patients in the unit:

Adult Hall A: Cardiac patients, respiratory distress patients, eye injuries, amputations, CBA's complicated burns, and other emergent patients. **Adult Hall B:** Flank pain, dehydration, GYN complaints, diabetics, fever, nausea and vomiting, complicated sutures and trauma patients.

Adult Fastrack: Simple first aid cases, simple sutures, simple burns, simple fractures, coughs, colds, sinusitis, aches or pains and other non-urgent patients.

CEC: All patients less than 18 years of age.

CDU/Chest Pain Center: Patients transferred from any area of Emergency Services/Chest Pain patients triaged directly into the unit.

RME/Rapid Medical Evaluation Unit: Level 4's and 5's; level 3 pelvic complaints.

Resources available in unit during a crisis: MD on floor at all times, RN's trained in ALCS, TNCC, and PALS. Three (3) board certified Trauma Surgeons. In the event of an internal disaster, staff is pulled from other areas to cover the unit experiencing the disaster.

-Unit uses: Omnimell and SureMed

-Bayers are used? Yes

-Weekend Option? Yes

-ED Float Pool? Yes

-RN's are required to work weekends per month? (e/o, every 3rd, every 4th, no weekends required)

Adult ER – every 4th weekend

CEC/Fastrack/CDU – every 4th weekend

RN's work holiday on the A/B schedule. Units are staffed by pattern.

-Uniforms are required? Royal Blue Scrubs for RN's and Ceil Blue for Techs. (Associate Purchases)

-Orientation to the unit lasts 2 weeks for seasoned ER RN's.

-Orientation to the unit occurs on all shifts.

-Other comments specific to the unit:

Security, radiology and respiratory staff housed in department. Shift supervisors at GMC do not take a patient assignment and are available as a resource.