

Emergency Guide



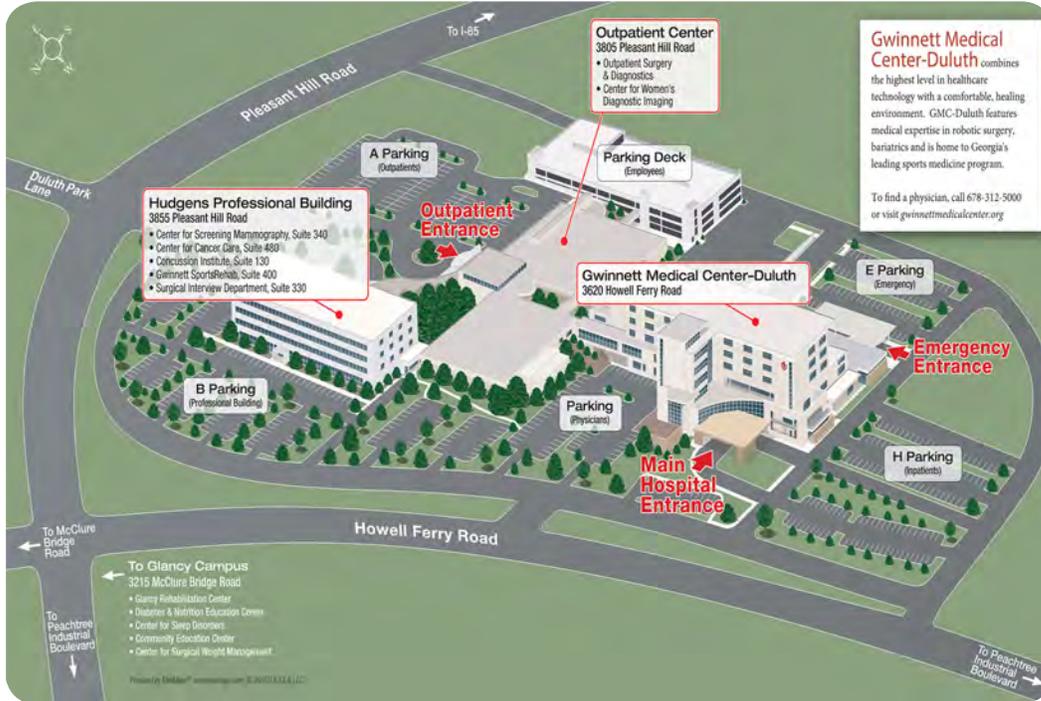
Gwinnett
Medical Center

Lawrenceville • Duluth

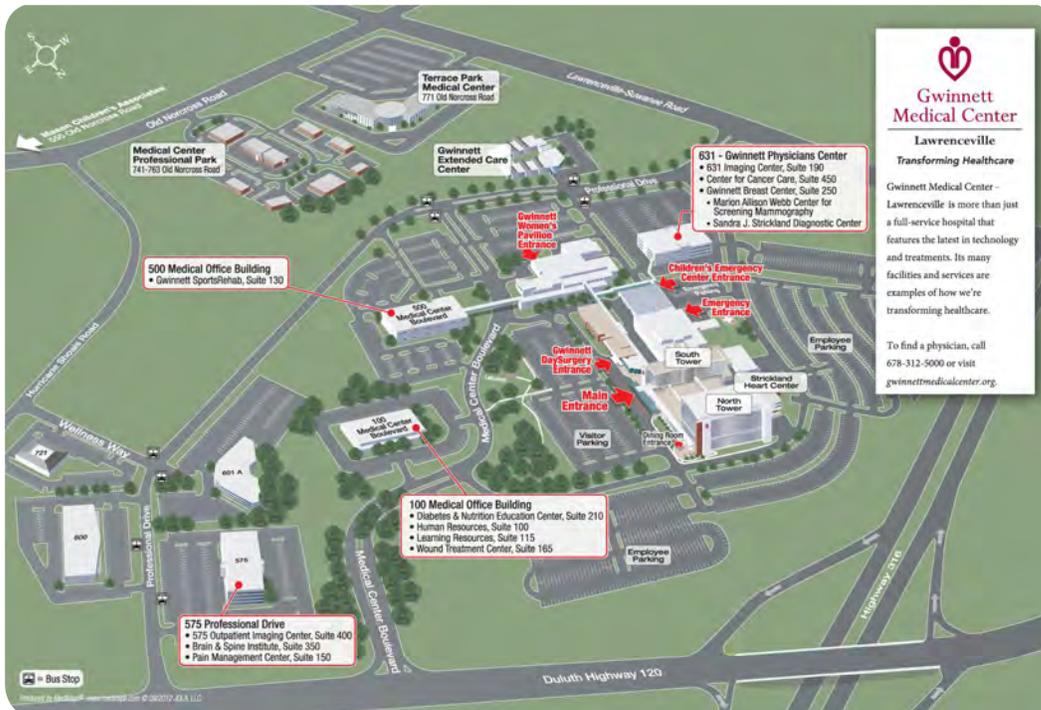
Transforming Healthcare



Maps



GMC-Duluth
678-312-6800



GMC-Lawrenceville
678-312-1000

*GMC-Lawrenceville is designated as a Level II trauma center.



Your Emergency Department Visit

When you arrive at a Gwinnett Medical Center Emergency Department, you will be asked to check in, and then, depending on the nature of your emergency, you may be asked to wait. There are a number of reasons for this:

- Patients with the most serious or rapidly changing conditions are treated first—no matter what order they arrive in.
- Depending on your problem, you may need to wait for a special room to be available.
- The arrival of ambulances bringing patients to the trauma unit also impacts the wait time.
- Some very sick people will need lots of time and people to take care of them, and we cannot always know how many critical people will come in while you are waiting.

The Emergency Department Process

Unless you come by ambulance, the first stop in your visit is triage. Triage is a process used in the Emergency Department to check everyone and decide who needs to see the doctor first. While there, a nurse will take your blood pressure, pulse, respiration rate and temperature and ask you about your medical problem. When you are called to the exam room, another will talk to you about your medical situation. The staff will ask many questions because the more they know about you, your general health and the reason you have come to the Emergency Department, the easier it will be for them to treat you quickly and safely. After the exam room nurse gets your information, a doctor will provide treatment. If you need to stay in the hospital, a physician from our Inpatient Medical Group will be called to care for you during your stay.

What to bring to the Emergency Department:

- A list of your allergies (medicine, food, latex)
- A list of any medicines that you take every day; this includes the dose and how often you take it. (If you do not have a list written down, just bring them with you)
- A list of any over-the-counter medicines, herbs and vitamins that you take every day
- A list of any medical problems that you have
- A list of surgeries that you have had
- The name and telephone number of your primary care doctor/ family doctor

Insurance verification and authorization for coverage is your responsibility. If you have questions about your coverage, contact your insurer. Phone numbers are generally listed on the back of your insurance card.

Before you leave the hospital:

- Make sure you know what's wrong, including signs and symptoms that would require returning to the Emergency Department and when to go in for a follow-up exam.
- Find out what you need to do to care for yourself at home, including what medications you should take and whom you should call if you have any problems.
- If follow-up care is recommended, be aware that additional charges, including insurance co-pays, may be required.
- Be sure to see the discharge counselor before you leave.



Medical History

Name: _____ DOB: _____

Address: _____

Phone Number: _____

Emergency Contact: _____

Address: _____

Phone Number: _____

Primary Care Physician: _____

Address: _____

Medical Insurance Provider: _____

Policy Number: _____

Blood Type: _____

Allergies: _____

List medications you are currently on:

Medication: _____ Dosage: _____

Medication: _____ Dosage: _____

Medication: _____ Dosage: _____

Over-the-Counter Medications: _____

Medical problems we should know about: _____

Surgeries you have had, and when: _____



How to Determine Whether a Medical Problem is an Emergency

The **Emergency Department (ED)** uses a system of triage that enables us to treat the most critically ill or seriously injured patients first. Emergency nurses and physicians review and revise triage guidelines annually to ensure all emergencies are addressed appropriately. The ED staff is dedicated to providing expert care in emergency situations and is there to provide care to anyone regardless of the ability to pay for services.

Whether a patient is taken to the ED in a private vehicle or transported by ambulance, he or she can be assured that his or her healthcare needs will be addressed promptly and appropriately.

To minimize wait times and to ensure proper treatment, use the following guidelines when making a decision to seek emergency or urgent care:

An emergency is any sudden or serious condition that requires medical attention within a minute to several hours.

Examples include:

- A sudden loss of breath
- Severe bleeding
- Chest pain
- Seizures
- Deep cuts
- Broken bones
- Poisoning from chemicals or drugs or an overdose

If a condition is life-threatening, call 911 for emergency transport.

An urgent care need is any condition that requires care within several hours and is not life-threatening. Patients with the most severe symptoms will be seen first.

Examples include:

- Persistent high fever
- Vomiting
- Severe ear infection
- Severe sore throat
- Insect bite or sudden rash

Often a patient who is waiting to see a healthcare professional in an urgent care situation may grow impatient. Please remember that those with more serious injuries or illnesses are being treated first. If a patient feels that his or her condition is worsening, alert the triage nurse so he or she can reevaluate the status of the patient.

Be proactive and reduce emergency care visits by following these simple steps:

- Seek care from a primary care physician before an illness or injury worsens
- Get a flu shot, especially if the patient is elderly or has chronic health problems such as heart disease, emphysema or asthma
- If a bad cough or a fever of 101 degrees is the symptom, do not go to work and risk infecting others
- Wash your hands frequently to avoid the spread of germs

If emergency medical care is needed, bring any medications you are taking with you. Also, have medical and insurance information up-to-date and on-hand.



Gwinnett Medical Center

Tips for Healthy Living

Cross Training - any sport or exercise that supplements your main sport

- Helps balance your muscle groups by strengthening different muscles
- Maintaining or even improve your cardiovascular fitness
- Reduces risk of injury
- Continuing to train with certain injuries, while giving them time to heal

Examples:

- Swimming: non-weight bearing, gives your muscles a break
- Water Running/Aquatics: alternative for injured runners or as a substitute for an easy running day
- Cycling or Spinning: low-impact ways to boost your cardiovascular fitness and strength
- Elliptical: low-impact alternative that provides total body workout

Your feet are important - protect them

- Wear appropriate shoes for your foot shape, foot stability, arch length and overall biomechanics of foot and lower leg
- Use shoe inserts to provide additional support and protection

Stay Cool

- Wear exercise apparel made of technical fabrics designed to wick moisture to the outside to keep body temperature cool

Don't Get Dehydrated

Avoidance Tips:

- Drinking plenty of fluids including water and sports drinks containing electrolytes
- Determine how much fluid you need by the amount you sweat
 - Light sweaters: drink 4-6 ounces every 15 minutes
 - Heavy sweaters: drink 13-16 ounces every 15 minutes





CPR Tips from the American Heart Association



Adults (hands only CPR)

- 1) Call 911
- 2) Push hard and fast in the center of the chest to the tune of *Staying Alive*

Babies

- 1) Call 911
- 2) **Conscious Baby:**
Position the baby face up on one forearm while cradling the back of the head with that hand. Place the other hand and forearm on the front. Do chest thrusts. Use your thumb and fingers to hold the jaw while sandwiching the baby between your forearms to support the head and neck. Lower your arm that is supporting the baby's back onto your opposite thigh, still keeping the baby's head lower than the rest of the body. Place two or three fingers in the center of the baby's chest. To do a chest thrust, push straight down on the chest about 1.5 inches. Then allow the chest to come back to its normal position. Do five chest thrusts. Keep your fingers in contact with the baby's breastbone. The chest thrusts should be smooth, not jerky.
- 3) **Unconscious Baby:** Use modified CPR
Give the baby two rescue breaths. If you don't see the chest rise, tilt the head and try two rescue breaths again. If the chest still doesn't rise, do 30 chest compressions. Repeat the chest compressions until help arrives.

Children

- 1) Call 911
- 2) Use heel of the one or two hands for chest compression
- 3) Press the sternum approximately one-third the depth of the chest (about 2 inches)
- 4) Tilt the head back and listen for breathing. If the child is not breathing normally, pinch the nose and cover the mouth with yours and blow until you see the chest rise. Give 2 breaths. Each breath should take 1 second.



Signs and Symptoms of a *heart attack*

For Men:

Chest: Pressure, fullness, squeezing or pain in the center of the chest - intermittently or lasting for a few minutes.

Breath: Shortness of breath, with or without chest discomfort.

Upper body: Discomfort in one or both arms, jaw, neck, back or stomach. Sometimes, this pain radiates, making it feel like a pulled neck or back muscle.

Other: Breaking out in a cold sweat, nausea or lightheadedness.



For Women:

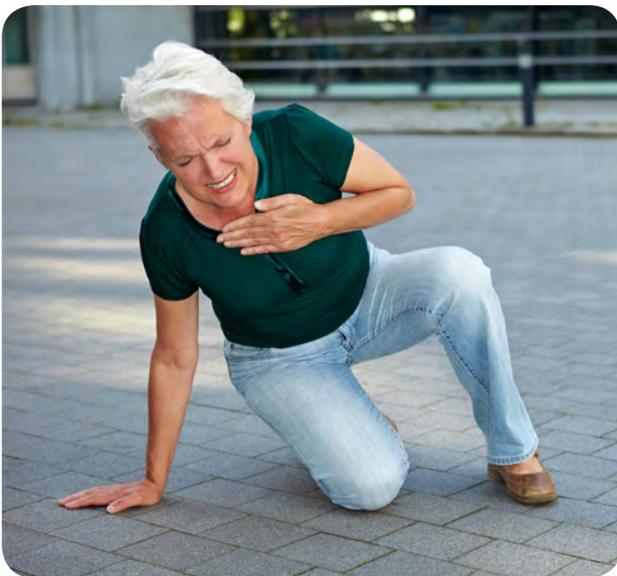
Chest: Pressure, fullness, squeezing or pain in the center of the chest - intermittently or lasting for a few minutes. Many women do not have chest pain.

Breath: Shortness of breath, with or without chest discomfort.

Upper abdomen: Pressure or discomfort that may feel like indigestion. Nausea and/or vomiting may occur.

Upper body: Discomfort in one or both arms, jaw, neck, back or stomach. Sometimes, this pain radiates, making it feel like a pulled neck or back muscle.

Other: Unusual fatigue and/or weakness. Breaking out in a cold sweat, lightheadedness or fainting.



If any of these symptoms are present, call 911 fast. Every second counts. It's far better to have a little embarrassment than to let a heart attack go untreated. Speak up for yourself and tell medical personnel: "I think I'm having a heart attack."

To learn more about ways to reduce heart attack risk factors, visit gmcheart.com



Do you know *stroke*?

You may be at a high risk for a stroke:

1. If you have a blood pressure above 140/90
2. If your cholesterol level is above 240
3. If you have diabetes
4. If you are a smoker
5. If you have irregular heartbeat
6. If you are overweight
7. If you do not exercise
8. If your family has a history of stroke

To reduce your risk for stroke:

1. Know your blood pressure. If high, work with your doctor to lower it.
2. Find out from your doctor if you have atrial fibrillation.
3. If you smoke, stop.
4. If you drink alcohol, do so in moderation.
5. Find out if you have high cholesterol. If so, work with your doctor to control it.
6. If you are diabetic, follow your doctor's recommendations carefully to control your diabetes.
7. Include exercise in your daily routine.
8. Enjoy a lower sodium (salt), lower fat diet.
9. Ask your doctor how you can lower your risk of stroke.
10. Know the symptoms of stroke:
 - Sudden numbness or weakness of face, arm or leg, especially on one side of the body
 - Sudden confusion, trouble speaking or understanding
 - Sudden trouble seeing in one or both eyes
 - Sudden trouble walking, dizziness, loss of balance or loss of coordination
 - Sudden severe headache with no known cause

FACE

Does one side of the face droop?
Ask the person to smile.

ARMS

Is one arm weak or numb?
Ask the person to raise both arms.
Does one arm drift downward?

SPEECH

Is speech slurred?
Ask the person to repeat a simple sentence. Is the sentence repeated correctly?

TIME

If the person shows any of these symptoms, **Call 911** or get to the hospital immediately.