42 Minutes in the Life of An ED RN

Observations from 3:11 PM through 4:43 PM

RN Workflow Observation Part I: 3:11 - 3:53 PM Monday September xth, 2015 4-6 Pts: Two in Trauma 1, two in Trauma 2, and additional support to 2 other pts. 2 Pts Cindy prompts MD for decision TO: 1 Pt Trans to Univ Hosp, 1 Pt left AMA PCT informs Cindy that PCT must go on long delayed pt in 1B: Response: "I'm not ready to & help others. Then leaves Dept. during Obs: 37 Pts in Overflow see the patient again. I don't Security have the results yet. I'll call Pt Care re: Pt you when I do." MD busy and Wallet doesn't speak w/ Pt. Cindy Labs/ tube labeling then explains to pt. the importance of those tests, Charting / Meds / offers to get ice water, etc...Pt Clinical Confer requests to go and leaves AMA. Assist Pt to BR, Cindy checks on two additional Getting Pt H2O, hall pts. to help out, as asked by etc....PCT work Hall pt returns from bathroom. Cindy rehooks up monitors and notes another RN. (4 primary pts, + 2 the clip she unhooked earlier is now gone..scavenged by a tech for Hall, + 2 assisted.) another pt while pt was in bathroom. Cindy tracks down another one. 3:11 3:32 Admit 2 Pts to IP (two Cindy informs elderly male disoriented pt (via EMS), from auto accident - possible stroke - came in with neighbor (no family) they new pts. will be staying overnight for obs / social svcs. Neighbor reports elderly wife is also at home alone and disoriented. May need to are then admit her via EMS also to Hosp until in home soc svcs can be arranged. Soc Svcs contacted...comes to department in 3 minutes. placed in

20

10

15

25

30

35

to IP (two new pts. are then placed in vacated beds within 10 minutes).