

# Welcome to Prince of Wales Hospital Emergency Department: While you wait...

## The Process

- 1. See Triage Nurse**
- 2. See clerk at reception**
- 3. Wait to be called**
- 4. Tell us if you are feeling worse**

Welcome to the Emergency Department (ED). This information will help you understand what will happen while you are here.

## Triage

On arrival to the ED you will see a specialist emergency nurse called the 'Triage Nurse'. The Triage Nurse assesses the urgency of your condition and allocates a triage category. The Australasian Triage Scale has five categories with target treatment times:

1. Immediate (*life-threatening - 2mins*)
2. Emergency (*imminently life threatening, or very severe pain - 10mins*)
3. Urgent (*potentially life-threatening - 30mins*)
4. Semi-urgent (*potentially serious - 60mins*)
5. Non-urgent (*less urgent - 120mins*)

The most critically injured or ill patients are seen first (category 1 and 2), regardless of when you arrived or whether you arrive by ambulance, walk in or are sent by another doctor.

While we endeavour to work as efficiently as possible, there may be a small wait to speak to the Triage Nurse at times of high activity. This process is intended to ensure patients with potentially life threatening conditions like heart attacks and strokes are seen most urgently. In some cases the nurse may hand out numbered cards to help facilitate this process. If you have any questions about this, please don't hesitate to ask.

Although all patients are seated together in the same waiting room, there are four separate areas within the emergency department where a doctor may see patients. You will be allocated to one of the following areas based on your assessment at triage:

- **The Resuscitation Bay (3 Beds):** Where the most unwell patients receive lifesaving interventions like CPR, major trauma assessment or minor surgical procedures.
- **Acute Area (15 beds):** For complicated and/or complexity adult patients.
- **Sub-Acute Area (9 beds):** Low risk complex patients.
- **Fast Track (9 chairs):** For uncomplicated or low complexity patients.

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Each of these areas is staffed with a team of doctors, nurses and other health professionals who are able to assess and manage patients with a variety of conditions. Patients can be seen in any of these four areas, and it is possible that patients arriving after you may be taken through earlier (*as they may be seen in a different area than you*). Some patients may also be taken through more quickly based on their clinical urgency as assessed by the Triage Nurses.

## Important Information

To help us with your treatment, please be prepared to provide the administrative staff at reception with:

- Your Medicare number / card
- Any private health insurance details
- Any religious/cultural requirements

The medical and nursing staff need important information to help care for you such as:

- Any current health problems
- Your current medications
- Allergies you may suffer from
- If you are pregnant or breastfeeding
- If you have had any recent overseas travel
- Home situation and social support

## Code of Conduct

Patients, relatives and staff all want to be safe in the ED. NSW hospitals have a policy of zero tolerance to violence of any kind. This means acts of violence; swearing, threats or verbal abuse will **NOT** be tolerated. Anyone who is violent or abusive will be asked to leave by the staff, security or police.

## From Triage to Treatment

Sometimes the ED waiting room may appear quiet, but inside the ED is actually very busy. No-one's treatment can be rushed, so we thank you for your patience and consideration. If you are waiting and feel the need to go to the toilet or step outside — tell the Triage Nurse.

**If you feel your condition is getting worse: you need  
to tell the nurse immediately.**

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## **Pain Relief**

If you are in pain, please tell the Triage Nurse who can help you. It is also important to talk to the Triage Nurse before taking any of your own pain medication while waiting for treatment.

## **Eating and Drinking**

Please do not eat or drink before you speak to the Triage Nurse. Some patients may need an operation or tests that require an empty stomach. If you are unsure whether or not you are allowed to eat, please ask the nurse. If you are diabetic, please tell the Triage Nurse.

## **Initial Assessment and Treatment**

The ED staff work as a team. Often an experienced nurse will begin your treatment and continue to monitor your condition in the waiting room. At John Hunter we have a waiting room nurse (*also called a clinical initiatives nurse*) who is responsible for caring for all patients in the waiting room. This nurse will continually monitor and communicate with all patients in the waiting room. In many cases, they will perform initial assessments and commence early treatment while patients wait. Please let the waiting room nurse know if your condition has changed and feel free to ask them any questions you might have.

Prince of Wales Hospital Emergency Department also employs Emergency Nurse Practitioners (ENPs) as part of their team. ENPs are highly experienced emergency nurses, qualified to provide treatment and discharge or refer some patients without the need for the patient to see a doctor.

A doctor or nurse will see you as soon as time permits. At any time, staff may be redirected to treat a patient with life-threatening or urgent conditions, but this will not affect your care. If you feel your condition is getting worse while you are waiting, please ask to speak to the Triage Nurse who will reassess you promptly.

## **Further assessment**

You may need further medical tests, or specialist assessment to help decide what the best treatment for you is. You will be involved in decisions about your treatment, admission and/or safe discharge.

Admission will be to the most appropriate ward for your care. In some cases this may mean you need to be transferred to another hospital. We may need to ask a specialist doctor or nurse from another part of the hospital to come and see you to help decide what care you need.

Some other common tests that may be performed while you are in the ED include:

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**Blood tests** - Many people who visit the ED will have blood tests – these might be done before or after you see a doctor. Some people, for example if they have pain in their chest, might need another blood test a few hours after their first one to see if things have changed. Blood test results will generally take an hour to come back after they have been sent to the lab.

**X-rays** – You may have X-rays taken while you are in the emergency department, for example of your chest if you are breathless or have chest pain, or of your arm or leg if you have hurt yourself.

**Computed Tomography (CT) scans** - A CT scan is like a 3D x-ray that contains more details than a standard x-ray. This test may require an injection of contrast through an intravenous cannula: if so your emergency doctor will talk to you about this.

If you have any questions about tests that have been ordered for you, please ask a doctor or nurse involved in your care.

**If at any time you don't know what is happening,  
please ask the staff.**

## **Other essential and support staff**

The ED staff work as a team. In addition to our doctors and nurses you may meet:

- Social Workers
- Physiotherapists
- Clerical Staff
- Radiographers
- Wards people/ security assistants
- Aboriginal and Torres Strait Islander Liaison Officer
- Pastoral team
- Other Doctors and Nurses from different specialty teams

All staff involved in your care should introduce themselves, but if you are unsure who someone is or how they are involved in your care, don't be afraid to ask.

## **Patients and Visitors**

We know support from your family and friends is important, but for safety reasons we can only allow one or two visitors with you inside the ED treatment area at any time. We may need to ask them to wait in the waiting area at times during your treatment.

Visitors must always respect the privacy and care of other patients. Children must always be accompanied by a parent or carer in the ED or the waiting room.

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## Toilets

Toilet facilities are available next to the entrance of the emergency department. Please utilise these facilities at your convenience. If you have presented to emergency with a pregnancy related problem, please inform the Triage Nurse if you need to use the bathroom. Baby change facilities are also available in the toilet area. Our staff members may occasionally knock on the toilet door to perform a safety check.

## Mobile phones and electronic devices

We understand the importance of remaining connected to friends and family while you are inside the ED, however there may be certain restrictions on the use of mobile electronic devices in certain areas of the ED.

Some areas contain sensitive equipment that can be interfered with by certain electronics. For this reason, please refrain from using mobile devices if directed to do so by a staff member. If you are unsure whether it is safe to use your mobile device in a particular area, please ask the nurse in that area.

While in the waiting room it is perfectly acceptable to use your mobile devices, providing you show respect and courtesy for those around you. We ask that you do not take photographs or videos without permission.

## What happens when I am discharged?

When you are discharged home make sure you:

- Understand your care plan and follow up (e.g. medications and appointments).
- Ask about medical certificates, letters and return of private x-rays.
- Ask your doctor about any GP or specialist medical follow-up requirements.
- Understand any Community Health Service options or support that may be available to you.
- Have any intravenous devices (i.e. IV cannulas) removed unless specifically instructed by the treating team.

## Ceasing Care

If you wish to cease your care, or leave the ED before your treatment is finished, you should always discuss it first with the doctors and nurses so that you are fully informed of any possible complications you may face.

**Never leave the Emergency Department without telling the nurses or doctors.**

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## **Aboriginal and Torres Strait Islander people**

Everybody will be asked 'Are you [is the person] of Aboriginal or Torres Strait Islander origin?' You are encouraged to identify your origin. If you need the assistance of an Aboriginal Liaison Officer or Social Worker please ask the Triage Nurse.

## **Non-English speaking patients**

If you need an interpreter please ask the Triage Nurse. If a patient is identified as being non-English speaking and you are interpreting as a friend or relative, it is recommended that you request a professional interpreter. While your ability to interpret may be excellent, patients are sometimes reluctant to discuss certain issues in the company of their loved ones & you may have trouble understanding or interpreting certain medical terminology – in turn this may make it more difficult to determine the correct course of action for the patient. Health care interpreters receive special training in medical terminology.

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## Your comments

If you have any concerns or comments about your treatment, please ask the nurse or doctor looking after you. We aim to achieve the best care for every patient in the ED. Sometimes balancing everyone's needs is a complex task.

If you have had an experience and you feel we could learn and improve from it, we are keen to hear from you. All feedback is given full consideration, and should be addressed to the Nurse in Charge.

## Parking

If you have parked in the hospital car park there will be a fee required on exit. If you are admitted to hospital (transferred to a ward other than ED) you may be given a voucher to cover parking costs. This will be discussed in more detail by our admissions staff.

More information on the hospital parking can be found at <http://www.parking.health.nsw.gov.au/>

## Did you know?

Other health care providers like GPs, pharmacies and after hours telephone services may provide options for care in less-urgent cases. In the Hunter area the GP Access After Hours service can be contacted on **1300 130 147**. The Triage Nurse may offer you a GP access appointment if you present with a suitable problem – this can save you some time and maintain capacity for the ED to efficiently treat other all of our patients.

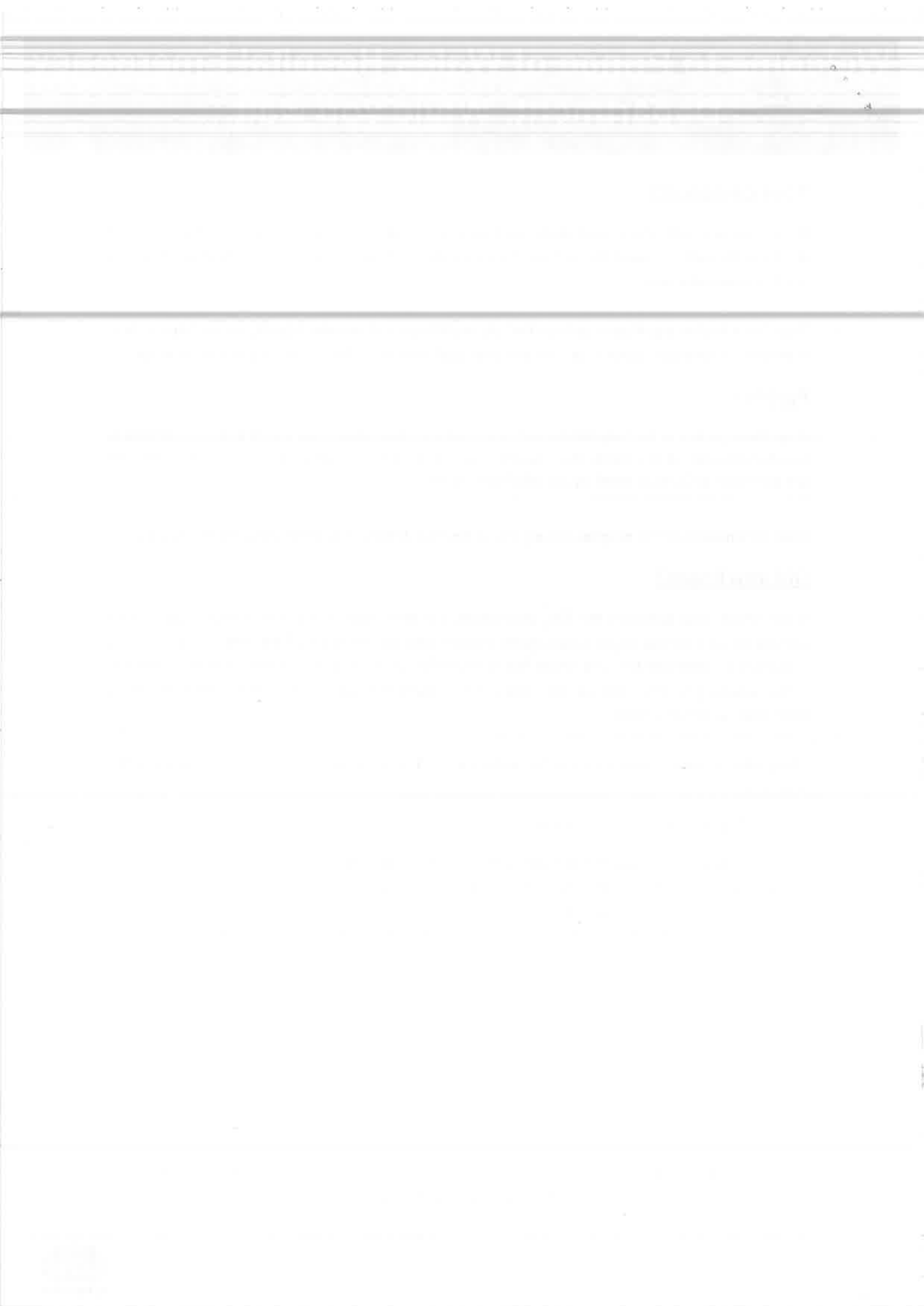
Many critically unwell patients arrive by ambulance and may not be seen by the other people in the waiting room.

At the Prince of Wales Hospital Emergency Department:

- The emergency department treated over 70,000 patients.
- More than 2,700 full time equivalent staff are employed.
- More than 47,000 surgical procedures were performed.
- On average, 50 patients arrive to Prince of Wales Hospital ED by Ambulance every day.

Adapted from the 'Welcome to the Emergency Department' brochure produced by the Emergency Care Institute.







# Welcome to Prince of Wales Hospital Emergency Department

During your time in our waiting room please feel free to access our '**While you wait**' information package that aims to answer some frequently asked questions.

This information can be accessed by scanning the quick reference (QR) code below. Most modern smartphones are able to scan these codes using the camera app, while others may require a separate application to be installed. A copy of this information package is also available from reception staff.



**If you are worried your condition may be life threatening please inform the triage nurses immediately, such as:**

- Chest pain
- Inability to breathe
- Stroke
- Severe injury
- Overdose / poisoning
- Major bleeding etc.

**If your condition becomes worse while waiting,  
please let us know.**

