



EMERGENCY  
MEDICINE

# Emergency Department Patient Monitoring System Pilot

Introduction for Nursing staff  
October 2012

# What is the protocol?

An agreed, standardised national approach to the monitoring of adult patients (i.e. aged 16 years and older) in Emergency Departments (EDs) from triage to discharge home or inpatient admission.

It aims to optimise the quality and safety of care for ED patients throughout their ED journey.

A corresponding protocol will be developed for paediatric patients in EDs.

The system has been designed to align with the National Early Warning Score (NEWS) to allow tracking of patient physiology across the ED/hospital interface.

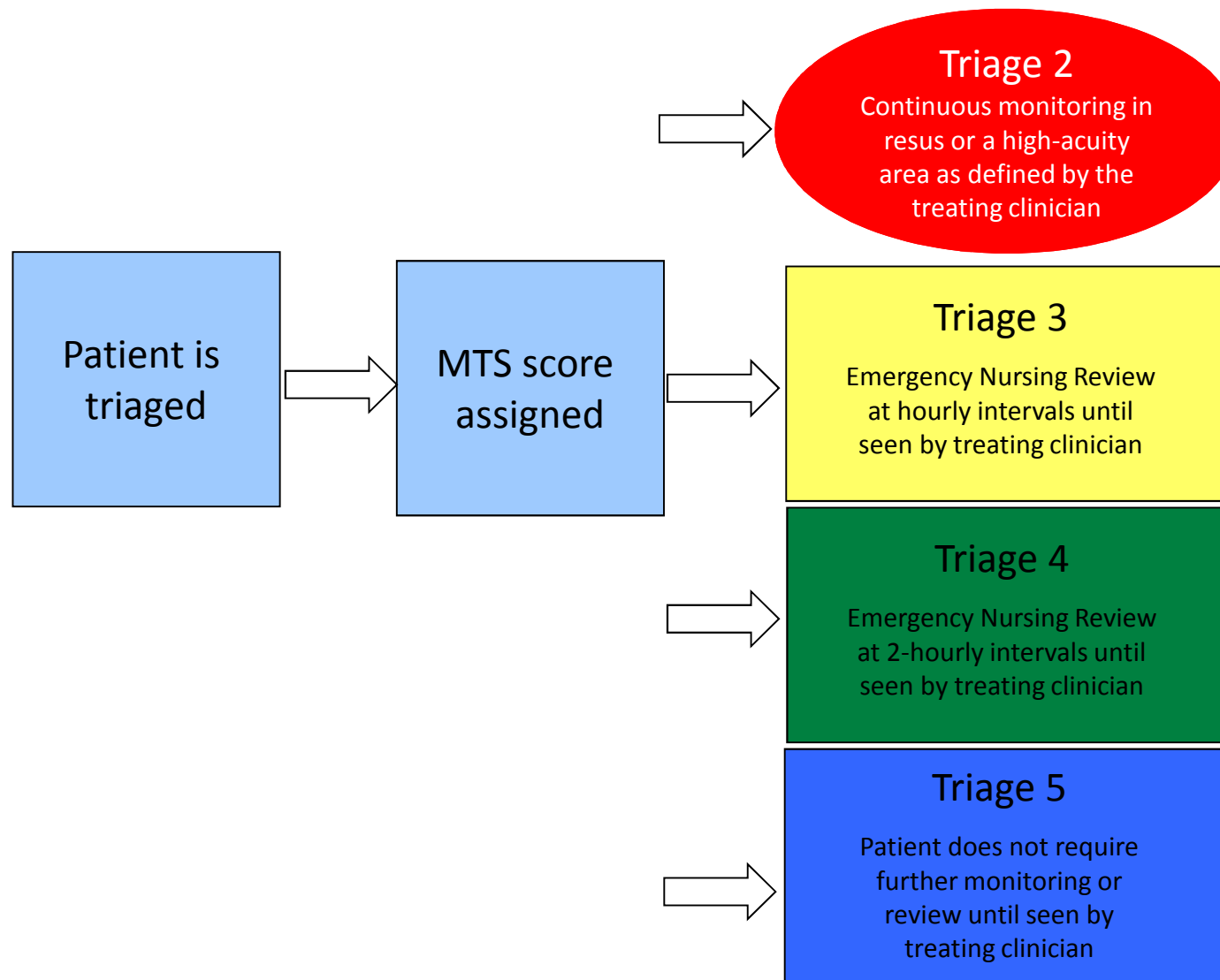
## Why is it necessary?

Standard times from triage categorisation to clinical review are not always achievable at present and delays to patient assessment by ED and in-patient on-call teams can occur.

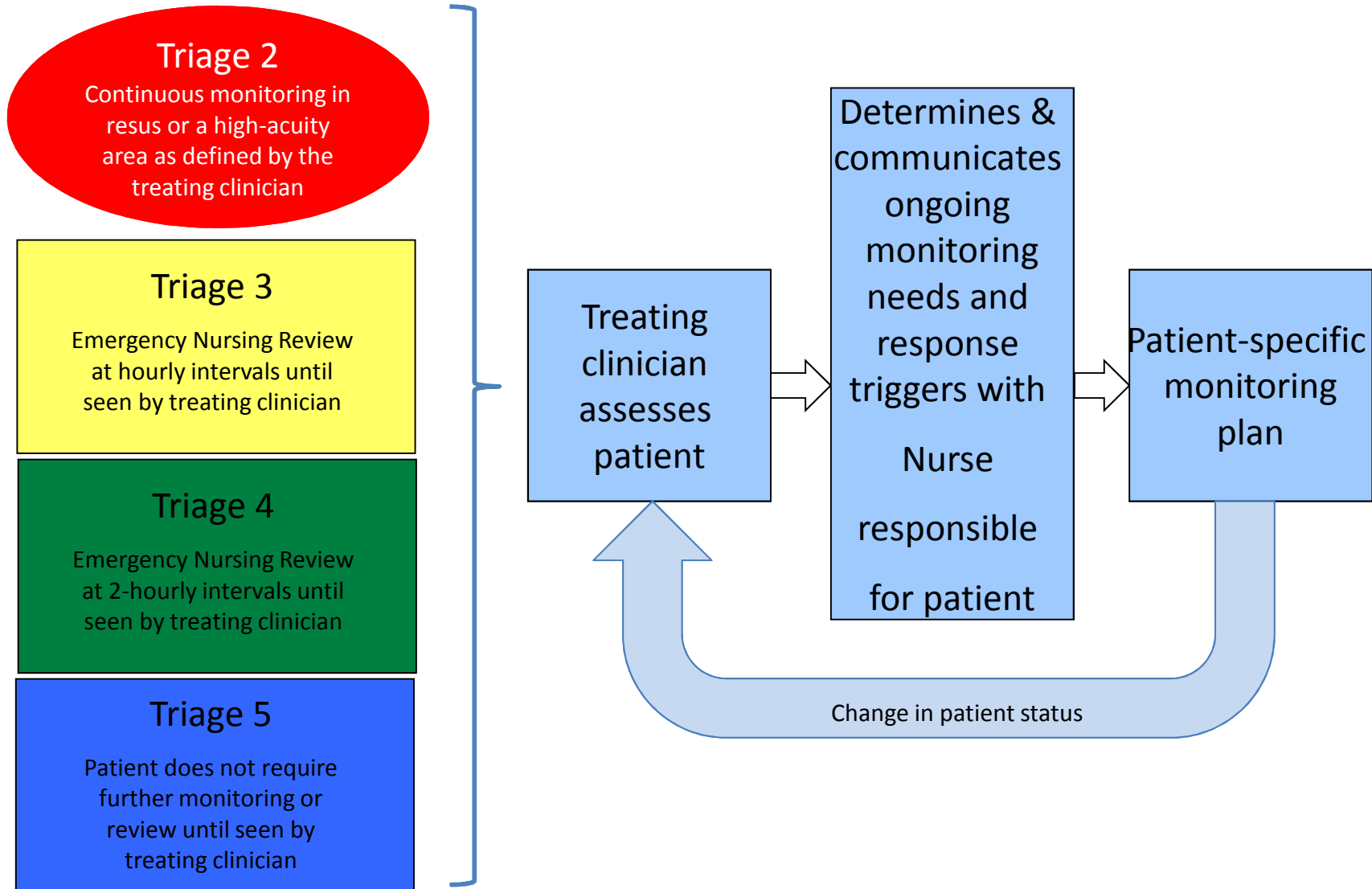
A system of patient monitoring with appropriate responses is needed to minimise the risks for patients who are waiting to be seen.

Whereas NEWS provides such a system for ward-based patient care, an ED-specific system is required given the undifferentiated nature of ED presentations, specific EM patient care requirements and the timeliness of responses appropriate to an emergency care setting.

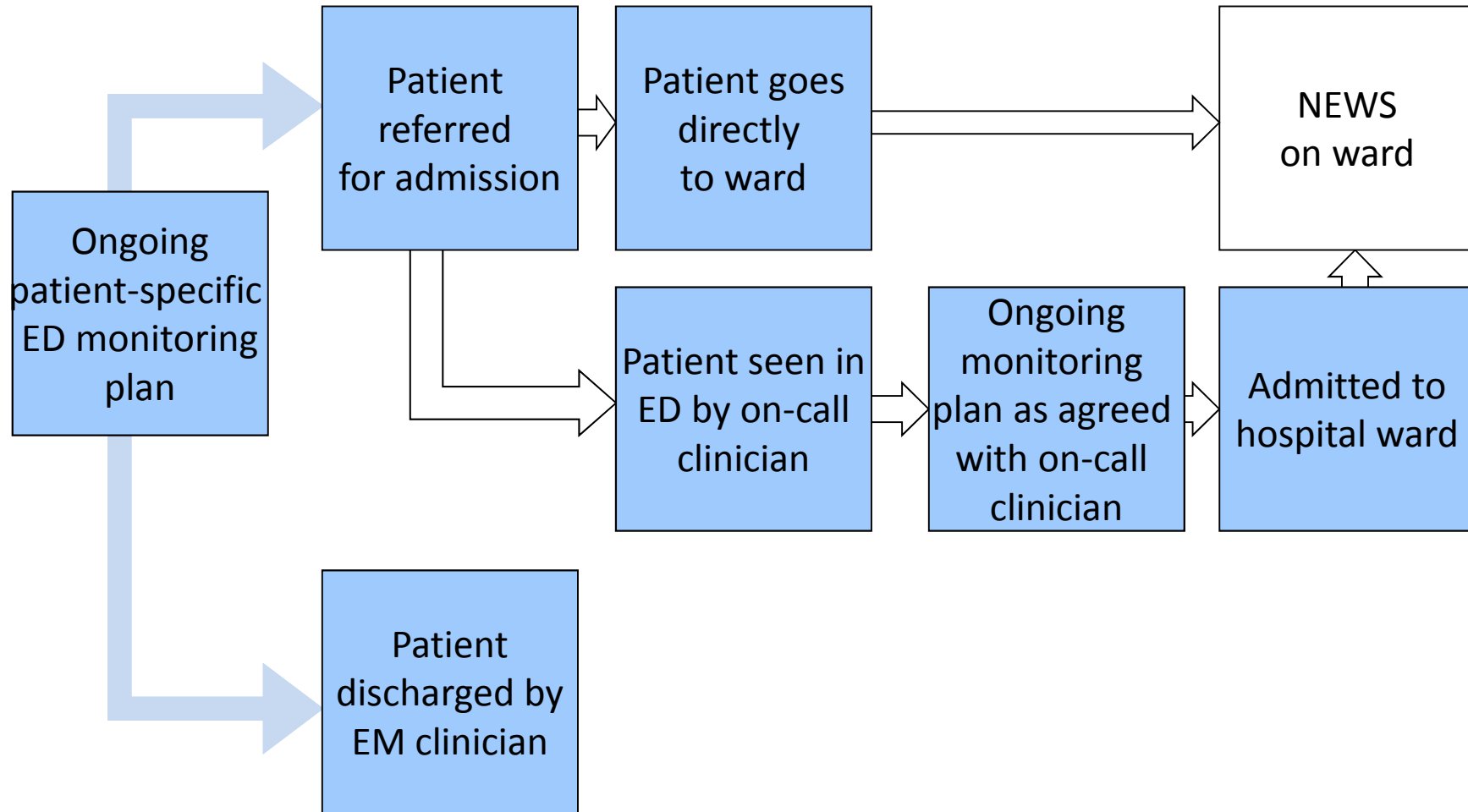
# Triage Priority and Monitoring Intervals



# Monitoring After Seen by Treating Clinician



# Seen by ED Clinician to Departure



# Deciding on a Patient-specific Monitoring Plan

The treating clinician should decide on the patient's Monitoring Plan once they have assessed the patient & communicates this to the nurse responsible for the patient.

The Monitoring Plan should be determined according to evidence based guidelines (e.g. NICE Head Injury Guidelines) or, in the absence of guidelines, on the basis of local clinical protocols.

The advice of the senior doctor on duty for the ED should always be sought if there is uncertainty on the part of the treating clinician or the responsible nurse as to the most appropriate Monitoring Plan for a patient.

# Deciding on a Patient-specific Monitoring Plan

The treating clinician with the nurse responsible for the patient should decide on the patient's Monitoring Plan once they have assessed the patient. The plan should include:

- Physiological observations required
- Frequency of observation
- Other observations and risks identified
- Consideration of the signs of sepsis
- Trigger values to prompt immediate clinician review
- Timing of planned clinician review
- Time and date plan commences and clinician's identity

# Starting a Patient-specific Monitoring Plan

- Clinical time for patient monitoring is a valuable ED resource and should be used effectively. Only the observations that are clinically indicated should be requested.
- An effective communication should occur between the treating clinician and the nurse responsible for the patient's nursing care with regard to the patient's Monitoring Plan.
- A structured format using ISBAR (next slide) is recommended to optimise the quality and reliability of the patient information shared at this key step in the patient's ED care.

## ISBAR for ED Patient Monitoring Communication

Heading	Key Information
Identification	<ul style="list-style-type: none"> <li>Identify yourself</li> <li>Identify patient</li> </ul>
Situation	<ul style="list-style-type: none"> <li>Patient location in ED</li> <li>Current problems</li> </ul>
Background	<ul style="list-style-type: none"> <li>Presenting complaint</li> <li>Significant history, medications et</li> <li>Allergies</li> </ul>
Assessment	<ul style="list-style-type: none"> <li>Working diagnosis</li> <li>Key signs indicating severity</li> <li>Risks to self or others</li> <li>Planned ED investigations and treatment</li> </ul>
Recommendations	<ul style="list-style-type: none"> <li>Specific treatment recommendations, where, what, when, by whom.</li> <li>Recommended monitoring               <ul style="list-style-type: none"> <li>Modalities</li> <li>Frequency</li> <li>Triggers for immediate clinician review</li> </ul> </li> <li>ED zone/clinical area in which patient should remain pending clinician review</li> <li>Time of next planned clinician review, if indicated.</li> </ul>

## Ongoing ED Patient Monitoring

- The plan should be revised whenever a clinician review is triggered. Senior EM clinicians should be involved early in all cases of physiological deterioration.
- The plan should be followed until the patient leaves the ED and is admitted to a ward area. It may be revised by an on-call clinician responsible for the patient's care and any such revisions must be documented.
- The Patient Monitoring Plan should be documented on the patient observation record.
- When implemented, the use of the EM Monitoring Protocol should be audited in each ED and at national level.

## ED patient monitoring system pilot

User feedback is essential to the development of the best possible monitoring system for ED patients.

Please submit your views on the safety, effectiveness and usability of the proposed system to the CNM leading this pilot or email to [emp@rcsi.ie](mailto:emp@rcsi.ie)

Thank-you for your help with this pilot.