A visit to the Emergency Department (ED) can be a stressful experience. A serious health issue, coupled with waiting time in an unfamiliar environment, can make for some anxious moments.

We want to provide you with the best and most timely care that we can, and we are striving to reduce the time that you wait. You should know that we use a computerized tracking system that gives us information about every patient who has registered to be seen, so even if it seems as if we are not paying close attention to your healthcare needs, you can rest assured that we are.

Can my family visit me in the treatment area?
One family member is allowed to wait with you in the treatment room. They must stay at your bedside. If the ED becomes full, or if a caregiver feels you need privacy, your family members may be asked to return to the waiting area. To be considerate of our critically ill patients, no child 12 or under may visit a patient without special permission from the charge nurse.

What happens when I am discharged?
You will be discharged, admitted to the hospital or on occasion, transferred to a different hospital. If you are discharged, you will be given instructions on how to care for yourself and may be given a number to call if you have continued problems. You may be instructed to follow up with your primary care physician. You will be responsible for your own transportation home.

Our goal is to provide each patient with emergency medical care of the highest quality. If you are dissatisfied with the care you receive at any time during your stay, please tell your nurse or doctor before you leave so that we can address your concerns.

How can I provide feedback?
After you are treated and released, you may receive a survey regarding your experience in the ED. You can also provide feedback on our web site at www.backushospital.org. We value and appreciate your feedback, and we will use your comments to identify areas that we can improve. We also encourage you to provide positive feedback, and recognize specific staff members who helped make your experience as positive as possible.

Thank you for choosing The William W. Backus Hospital for your medical needs.

Please note that patients whose insurance requires a co-payment will be asked to pay the co-payment before they go home. This “Point of Service” payment is similar to physicians’ offices, pharmacies and other hospitals across the nation. The payment is made in the Registration Department. Thank you for your understanding.
Why do patients have to wait for treatment in the Emergency Department?

People wait in EDs for many reasons. Some of these include:

- The sickest patients are seen first.
- Overcrowding due to epidemics such as the flu or ambulance diversion of patients from other crowded hospitals. Also, many emergency patients may arrive at once.
- Waiting for X-ray and laboratory results (some test results take longer than others.)
- Waiting for consultations from specialist physicians.
- Shortages of inpatient beds in the hospital, resulting in patients remaining longer than expected in the emergency department.

How long can I expect to be in the ED?

A triage nurse will grade your condition by severity — patients with life-threatening conditions such as a stroke or heart attack are seen first.

Once in the treatment area, average stays are approximately one to three hours for released patients and five hours or more for patients who are admitted to the hospital. Your total stay may depend on your symptoms, illness and whether you have to be admitted to the hospital. Also, if the emergency physician consults with a specialist or you have special tests and X-rays taken, your stay may be longer.

The time of day and the day of the week is also a factor. Typically, the ED is busiest from 2-10 p.m. Weekends and Mondays are usually the busiest.

Why do some patients get seen before others?

We must care for critical patients with life-threatening conditions first. Even though it might seem like your illness or injury is severe, you may have to wait while sicker or more severely injured patients are seen first. However, the ED has a separate area called Convenient Care dedicated to treating patients with minor illnesses and injuries, as well as medication refills. In many cases, Convenient Care allows patients with minor conditions to be seen, treated and released faster.

What is triage?

The triage process determines who needs to be seen first.

When a patient enters the ED a triage nurse will determine the severity of their condition, based on symptoms.

In addition, when a patient first arrives, personal and medical history information will be obtained, and vital signs will be checked, including temperature, heart rate and blood pressure.

Do extensive waiting times affect treatment outcomes?

Our emergency staff works very hard to make sure no one waits so long that it will affect their treatment.

We do our best to make sure that all patients are treated as quickly as possible. If you have to wait, even though the waiting room doesn’t appear to be busy, please be patient. An empty waiting room doesn’t mean the ED is not busy. For example, patients who arrive by ambulance enter through a different entrance. Also, many important activities take place that patients don’t always see, such as processing lab and other test results. Our policy is to NOT have patients in the waiting area. If there is space available in the ED, you will be brought to a bed. If a patient who needs emergency medical care becomes frustrated and leaves, this may affect their illness and outcome. If you choose not to wait for treatment, please inform the triage nurse before leaving.

How long does it take to get laboratory and X-ray results?

To accurately diagnose your condition, we need time to review any laboratory tests and X-rays. Most results take approximately two hours from the time they are ordered to the time we have the results. However, some tests take longer to process than others.

Who will be caring for me?

As a patient in the ED, you will be cared for by a team of highly skilled professionals. These may include the following:

- A Medical Doctor (MD or DO) has overall responsibility for your care. Doctors coordinate care with the laboratory, ambulances and other doctors as necessary as well as practice in Convenient Care. Physician Assistants (PA) and Nurse Practitioners (NP) also provide emergency care.
- A Registered Nurse (RN) will assess and monitor your physical condition, give you your medication, maintain your IV and keep you and your family informed of any tests and procedures. Your nurse will also provide you with important discharge information before you go home. Each nurse is responsible for several patients and works very closely with your doctor to provide the best care possible for you.
- A Paramedic and Patient Care Technician (PCT) or tech may work with your nurse and doctor. PCTs check your vital signs, collect lab specimens, transport you to special testing and assist you as needed to make your stay as comfortable as possible. Many of these are licensed Emergency Medical Technicians (EMTs).
- Mental Health Clinicians are available in the ED for 16 hours of the day to diagnose and treat mental health issues.
- A specially trained nurse from Social Services may also see you during your stay. Social workers sometimes play a vital role in caring for ED patients. They may assist in referring you to outside agencies for follow-up medical care.
- Unit Coordinators handle much of the incoming and outgoing communication for the Emergency Department. For example, if a family member calls to check on a patient, the unit coordinator assists in providing the information.