

## Patients and Visitors

We know you need the support and encouragement of your family and friends to assist you, but for safety reasons we can only allow one or two visitors with you in the ED treatment area at any time. Sometimes we may need to ask them to leave during your treatment.

Visitors must always respect the privacy and care of other patients.

Children must always be accompanied by a parent or carer.

## What happens when I am discharged?

When you are discharged home, make sure you:

- Understand your care plan (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.

## Ceasing Care

If you wish to cease your care, 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.*

## Aboriginal and Torres Strait Islander people

Everybody will be asked whether they are of Aboriginal and or Torres Strait Islander descent and you are encouraged to identify yourself. 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.

## Your comments

If you have any issues 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.

## Did you know?

Other health care providers, like GPs and after hours telephone services may provide another option for care in non-urgent cases.

NSW EDs treat around 2 million people a year.

Many critically unwell patients arrive by ambulance and are not seen in the waiting room. In many EDs, an average of 50 ambulances arrive every day.

**For health advice and information call  
*healthdirect* Australia on 1800 022 222**

# Welcome to the **EMERGENCY** Department



## WHAT WILL HAPPEN?

- ① See triage nurse
- ② See clerk at reception
- ③ Wait to be called
- ④ Tell us if you are feeling worse

## Emergency Department (ED)

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

### Triage

On arrival at the ED you will see a specialist emergency nurse called the 'triage nurse'. The triage nurse assesses the urgency of your condition. The triage system has five levels with target treatment times:

- 1 **Immediate** (life-threatening—2 mins)
- 2 **Emergency** (could become life-threatening—10 mins)
- 3 **Urgent** (not life-threatening—30 mins)
- 4 **Semi-urgent**—60 mins
- 5 **Non-urgent** (needs treatment when time permits—120 mins)

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

Minor illnesses and injuries (like nausea, minor cuts, sprains and strains) may be treated in a separate area of the ED which has its own dedicated staffing.

### Code of behaviour

Patients, relatives and staff all want to be safe in the ED. NSW hospitals have a policy of zero tolerance to violence. 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.

## Important information

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

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

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

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

### From triage to treatment

Sometimes the ED waiting room may appear quiet, but the treatment area is actually very busy. No-one's treatment can be rushed, so we thank you for your patience and consideration.

*If you feel you are getting sicker, you need to tell the triage nurse immediately.*

*If you are waiting and feel the need to go to the toilet or step outside, tell the nurse.*

### Pain Relief

If you are in pain, please tell the nurse who can assess your need for pain relief.

### Eating and Drinking

Please do not eat or drink before you speak to the triage nurse. Sometimes you should not eat or drink anything because you may need an operation or tests which require an empty stomach.

## Initial assessment and treatment

The ED staff work as a team. Often an experienced nurse will begin your treatment before you see a doctor. The doctor will see you as soon as possible. At any time, a doctor may be called away to treat a life-threatening or more urgent case, but this will not compromise your care.

### Further assessment

You may need further medical tests, or specialist assessment to help decide what is the best treatment for you.

You will be involved in decisions about your treatment, admission and/or safe discharge.

Admission will be made to the most appropriate ward for your care. In some cases this may mean you need to be transferred to another hospital.

If at any time you don't know what is happening then please ask the nurse or doctor.

*You should always know what is happening next.*

### Other essential and support staff

The ED staff work as a team, so you may meet other staff on your visit such as:

- Social Workers
- Physiotherapists
- Wardspersons

Further information about the roles of ED staff is available on the displayed poster.