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Letter to the Editor Open Access

Flow through the Emergency Department

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Letter

I am writing in concern to the article written by Li, Georgiou, Vecellio (2015), discussing the flow through the emergency department [1]. I am currently working in a Level 3 Trauma Center that is currently working on different processes to improve the patient flow through the very busy emergency department (ED). I am currently in a position to start implementing these new processes in the ED. Currently, there are two new processes being started to promote flow in the ED. The length of stay (LOS) for patient outcomes has a tremendous effect. Patient satisfaction is a very large statistic that is easily changed by shortening the LOS. Many process such as Rapid Medical Examination and Results Pending Area are being started in many hospitals across the United States all in order to decrease the overall ED LOS and improve patient outcomes and satisfaction. In an article by Arkun et al. [2] states that a survey of 250 emergency departments published in the Annuals of Emergency Medicine in 2005 found that 11% of them regularly were on diversion, 73% had two or more boarded patients, 59% used hallways for patients, 38% doubled up patients in rooms and 47% used non-clinical space for patient care. Overcrowding in ED's has become a very large problem for many hospitals and a solution needs to be made.

In the article by Li et al. [1] the flow through the emergency department is looked at in four different hospitals when dealing with the overall LOS in the emergency departments for patients that have to have a full panel of blood work performed. This article is very informational including the statistics for many factors including overall LOS for patients. One topic that should be included is if the blood draws are being performed by nursing staff or by phlebotomist. This might change the study and overall LOS. The article is very well presented and easy to read. One suggestion is the tables and charts are very small in this article and can be hard to read due to the small font and pictures. Overall, the article is a good study and shows good information that can be used by other emergency departments to improve patient flow.

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