

Understanding Emergency Department Procedures

Anderson Regional Medical Center's critical care patients are ALWAYS top priority, no matter who has been waiting longer in the Emergency Department.

What happens first?

We all work together as a team. You will be seen by a nurse and a doctor. However, many members of our team will help take care of you. We do this to minimize your wait and expedite your care.

Initial assessment

Your visit will begin with an initial assessment by the Triage Nurse, who will be wearing navy or light blue scrubs. This nurse will evaluate your symptoms, vital signs, medical history and current medications to determine whether you have a critical or non-critical condition, and assign you a Triage Level. ***Patients are seen based on the Triage Level, NOT in the order in which they arrive.*** More seriously ill patients are seen first, even though they may come to the department after other patients.

What happens after triage?

You will be seen by the doctor as soon as possible and, if you are triaged as emergently ill, you will be seen ahead of anyone who is not emergently ill. Some patients will be sent to the Non Urgent Care Unit.

What happens if the Non Urgent Unit is closed?

Our Non Urgent Unit is open from 10 a.m.–10 p.m. Any patients who were not seen in the Non Urgent Unit prior to the unit closing will be seen in the ER. Again, patients are seen based on their Triage Level, NOT in the order in which they arrive. There are, on occasions, times when the number of patients in the Emergency Department, combined with the acuity (severity of illness) of those patients, will or can cause a backlog.

How long will I be here?

- Labs - 1 hour
- X-ray - 1.5 hours
- Ultrasound - 2 hours
- CT Scan - 2.5 hours (depending on type of study and if contrast is required)

These numbers are our best estimates at an average time; your experience may differ depending on the number of patients, how sick other patients are, and the time of day.

What do I need to know?

Our goal is to identify emergency conditions and treat your symptoms. A definitive diagnosis is not always possible in the ER. Almost all ER patients require follow-up care.

If the doctor determines you do not have an emergency medical condition you will have the opportunity to seek care in a clinic setting, where the cost of care is likely to be less. If you choose to obtain care in the emergency room you will be asked to pay a portion of the bill for the emergency room and the doctor.

Our registrars will complete your registration process before you leave and return your ID and insurance cards. It is important to supply a current and accurate address and phone numbers as well as the name of a contact person.

- Cell phone use is allowed in the rooms.
- Due to safety precautions, only one visitor is allowed in a room with an adult patient; two visitors are allowed with pediatric patients.

There are two restrooms located in the Admissions Lobby to the left of the entrance. There is also a restroom in the back corner of the Emergency Room.

How do I leave the ER?

Once all of your test results are back, your doctor will discuss your plan of care. Most patients are treated and discharged to go home from the emergency room.

If you are admitted to the hospital, you will be transferred to a patient room and we will notify your primary care physician. If you do not have a physician, a physician from our staff — called a hospitalist — will coordinate your care while you are at our hospital.

During high volume, most patients who are admitted to the hospital wait an average of six hours before they are moved to an inpatient room. You will be closely monitored during this time.

If your emergency room physician determines you can go home, you will receive written instructions about how to take care of yourself after you leave the hospital. It is important to follow these instructions, take all prescribed medications and schedule a follow-up appointment with your personal physician. If you have questions about your discharge instructions, please ask your nurse.

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