

## **Making the Most of Emergency Room Visits**

*My mom recently had to call 911 and spent 6 frustrating hours in Emergency. She finally was sent home after a harrowing experience.*

*Is there any point in even taking my elderly parents to the hospital? How can I be sure they are seen quickly?*

It's important to understand how Emergency departments are run, the alternatives, and some tips for preventing a health crisis. Here are some guidelines:

### **Visiting Emergency:**

Medical professionals advise a visit to Emergency when any *acute* change occurs; in the case of the elderly, this might include trouble breathing, decline in cognition, a bad fall or perhaps excessive bleeding when taking blood-thinning medication such as aspirin.

Rather than driving your parent yourself, you may wish to call 911. The Emergency Medical Services will arrive quickly, assess and stabilize your parent, and advise whether an Emergency visit is required.

### **Making the Most of Your Visits**

Emergency room staff strongly advise that patients bring an advocate, ideally a close friend or family member. That person should have a list of the patient's current medications and dosage, provide information as requested by the staff as to how their behaviour or condition compares to their normal state, and generally act as an advocate for the patient, who is usually confused, in pain and fearful. The advocate should also make notes about findings and recommendations.

When all patients enter Emergency, they are seen by a triage nurse who determines the urgency of their condition using a 5-level assessment tool known as the *Canadian Emergency Department Triage and Acuity Scale*. For example, Level 1 patients, in critical, unstable condition, such as cardiac arrest, must be seen immediately. Patients are therefore seen based on the acuity of their condition, not arrival time, nor the fact that they arrived by ambulance.

### **Geriatric Emergency Nurses:**

A new innovation in many Emergency departments is the Geriatric Emergency Management, or *GEM, nurse*. This is a practitioner who will make a full geriatric assessment, including physical condition, cognitive level and home support. GEM nurses can diagnose, order tests and prescribe, working in consultation with the physician and emergency team. Their goal is to treat seniors, and to discharge them with a care plan that will ensure better long-term health, that will prevent future Emergency visits.

## **Alternatives for Emergency Care**

*Urgent Care Centres* are clinics designed for low-acuity emergency patients, usually with a referral relationship to major hospitals. In the Greater Toronto area, Urgent Care Centres are located at North York Branson Hospital and Sunnybrook Women's Hospital, as well as Etobicoke Urgent Care Centre (416 74102273) and Metro Urgent Care Centre (416 222-6007).

*Telehealth Ontario* (1-866-797-0000) allows 24/7 telephone access to a registered nurse, who can help assess the seriousness of symptoms and suggest your options. *MedicAlert* bracelets, which contain medical history and contact information, and personal emergency response systems such as *Lifeline*, allow 2-way communication to help guide your parents in assessing their problem and receiving help.

## **Being Prepared**

Be sure emergency information is collected, updated and accessible, including medications, pharmacy name, family doctor's name, medical history, valid health card (photo-ID health cards have expiry dates) and updated contact names and phone numbers. Attend medical appointments with your parents, meet their doctors and learn about their medical conditions.

Becoming a partner in your parents' wellness will pay off when emergencies do arise.

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