

NATIONAL EMERGENCY NURSES ASSOCIATION



Position Statement	Critical Care Patients in the Emergency Department
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Description:

With increasing frequency, critically ill patients are presenting to emergency departments and being detained there, in response to overcrowding and other factors, for extended periods of time. Emergency Nurses provide nursing care which encompasses different levels of acuity and intensity. However, although often initiated in the Emergency Department, critical care is best sustained in designated critical care units so to maintain patient health and safety.

NENA Position:

NENA believes that the specialty of emergency nursing encompasses patient care which may require critical care interventions.

NENA further believes that appropriate human resources, equipment and organizational support must be provided to appropriately care for patients requiring these critical care interventions in an emergency care environment.

Issue:

With increasing frequency, critically ill patients are presenting to emergency departments and being detained there, in response to overcrowding and other factors, for extended periods of time. Emergency Nurses provide nursing care which encompasses different levels of acuity and intensity. However, although often initiated in the Emergency Department, critical care is best sustained in designated critical care units so to maintain patient health and safety.

NENA POSITION:

NENA believes that the specialty of emergency nursing encompasses patient care which may require critical care interventions.

NENA further believes that appropriate human resources, equipment and organizational support must be provided to appropriately care for patients requiring these critical care interventions in an emergency care environment.

NENA believes agencies must provide policies to ensure the expedient transfer to critical care beds once initial stabilization of the patient has been established.

NENA believes that agencies have an obligation to ensure emergency nurses are afforded the opportunity

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for ongoing education.

RATIONALE:

Emergency nursing includes acute, unplanned situations that may require lifesaving or life supportive interventions. Accessibility to this care must be assured to all citizens. Provisions of appropriate human resources, equipment and need for immediate and timely ongoing care are perceived as readily available by the patients and their family.

References:

Chalfin, D.B.; Trzeciak, S.; Likourezos, A.; Baumann, B. M.; Kvetan, V. and Delinger, P. (2007). The impact of clinical and economic impact of delayed transfer of critically ill patients from the emergency department to the intensive care unit. *Critical Care Medicine*, 35(6), 1477-1483.

Emergency Nursing Association, Position Statement on Holding, crowding and patient flow. Retrieved April 2016 from: <https://www.ena.org/practice-research/Practice/Position/Pages/Holding.aspx>

Intas, G.; Stergiannis, P.; Chalari, E.; Tsoumakas, Kostas; T.; Fildissis, G. (2012). ED boarding time, severity of illness, and discharge destination on outcomes of critically ill ED patients. *Advanced Emergency Nursing Journal*, 34(2), 164-169.

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