

Telehealth in the Emergency Department: Impact on Wait Times

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Purpose: Undergraduate nursing students investigated if implementing telehealth in the Emergency Department (ED) can help reduce wait times. Extensive wait times in the ED have been an ongoing patient/family and healthcare team concern. COVID19 pandemic heightened this concern contributing to decreased patient satisfaction and patient quality care, increased hospital costs, increased PPE usage, and increased exposure to COVID19. Does implementing telehealth services in the ED help decrease wait times compared to ED without telehealth services?

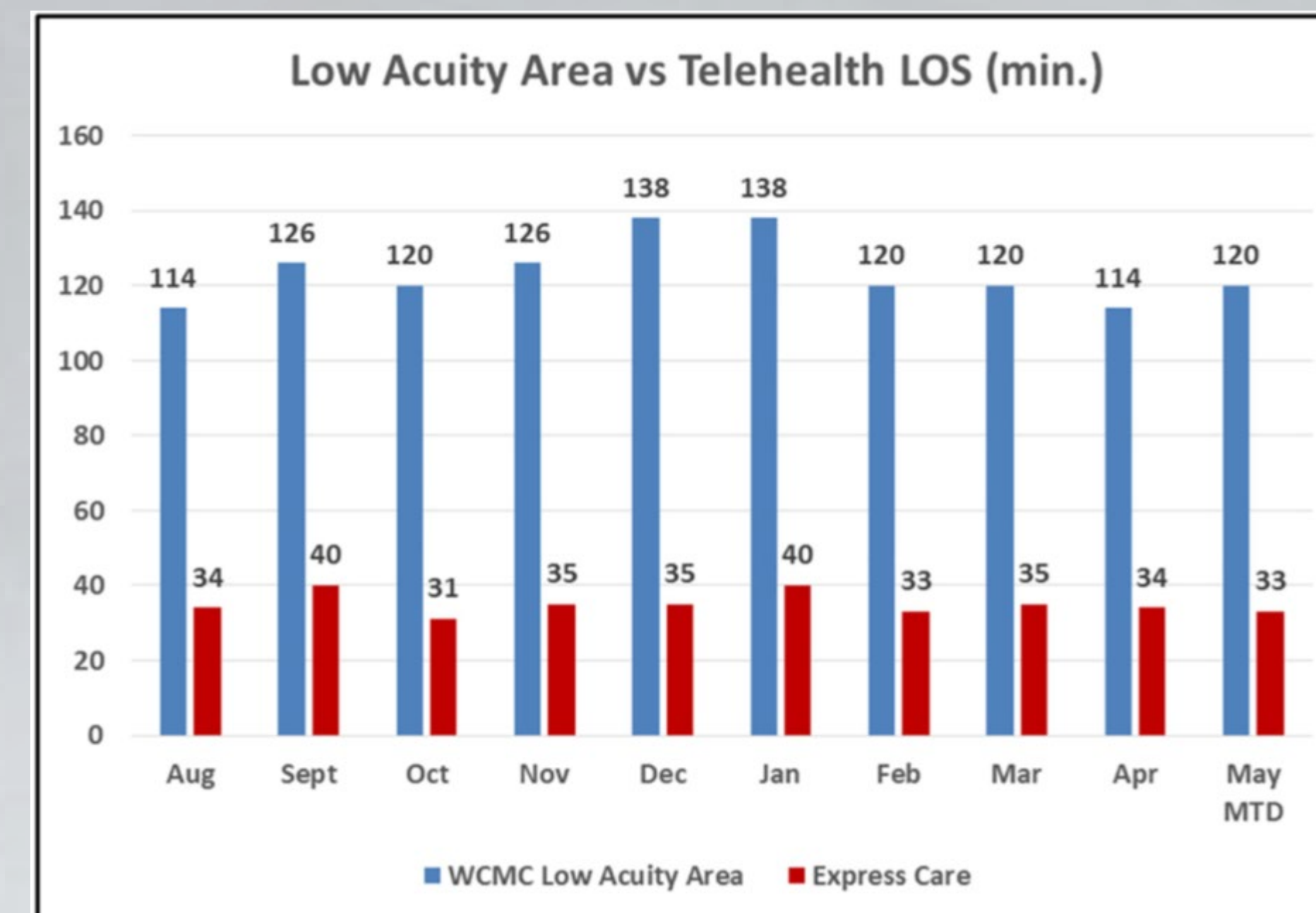
Methods: Literature search with key terms: telehealth, wait times, and patient satisfaction, branched out to include telemedicine in ED, ED and telehealth, TPT, wait times in ED, ED and quality of care, and decreased satisfaction with wait times.

Databases used during literature searches: PubMed, CINAHL, and ClinicalKey. All articles within the last five years (2017 to 2021) and peer-reviewed journals were included during literature review.



OBJECTIVES

By the end of the research process, our group will be able to determine the positive effects of telehealth when utilized in the emergency departments and provide evidence that could further the system's implementation in surrounding hospitals.



(McHugh et al., 2018)

RESULTS

Multiple research studies showed the application of telehealth reduced wait time and visit stay in the ED. Virtual low-acuity visits conducted in a private room move through the whole process in approximately 30-45 minutes from arrival to discharge. A typical low-acuity ED visit is 2 to 2.5 hours. An innovation in emergency nursing article, transforming emergency care through a novel nurse-driven ED telehealth express care service results in approximately two hours decreased in length of stay for low acuity cases.

Additional research studies elaborated on the impact telehealth services have on patient satisfaction in the ED. Ultimately, these studies found 85% of patients rated their physicians with a 5-star rating. Had telemedicine not been used 43% of patients reported they would have used urgent care/retail clinics, 29% would have gone to the doctor's office, 15% would have done nothing, and 6% would have gone to the emergency department.

Finally, regarding the current COVID-19 pandemic, telehealth was observed on ED units that could save on PPE, with shortages taking a toll on most hospitals in the country. In these cases, we look at the amount of PPE used, analyzing 302 patients evaluated by telehealth, with 153 of these patients evaluated and discharged by a telehealth provider. Studies found that telehealth saved 413 sets of PPE within these patients, as well as a 62.5% ED-LOS.

STUDENT PARTICIPATION

This is a Final Group Project Presentation for a Nursing Research class



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(McHugh et al., 2018)

CONCLUSIONS

Conclusion: Overall findings show a decrease in wait times and reduction of overcrowding in the ED when telehealth methods were utilized. Telehealth care benefits include reduction of possible unnecessary exposure to infection while reducing the overuse of PPE amidst COVID19 pandemic restrictions. Screening and interviews via multimedia interaction with physicians expedited the assessment and diagnosis process and addressed the overcrowding in the ED.

According to Yulan Wang, President of the American Telemedicine Association, **“Telemedicine will become the core methodology of healthcare delivery in the future. That is where we are going to get the efficiencies we need to provide affordable care”.**

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ACKNOWLEDGEMENTS

BSN 2022 Cohort