The Ins and Outs of Emergency Care

Don’t have health insurance—or just need help in a hurry? Here are some insider tips to getting the care you need in the emergency room.

September 2, 2005 By Shawn Rhea

Movie curator Rhea Combs, 35, was producing a film festival when she began experiencing excruciating chest pains and difficulty breathing. She put off going to the hospital for roughly a day, but when climbing a flight of stairs became impossible, the New York City resident headed for the emergency room at Lenox Hill Hospital. Combs arrived at around 2 p.m., waited an hour to see a triage nurse, and at about 5 p.m. received the first in a series of diagnostic tests.

“They took an X-ray and after that, sat me in a cold, back hallway that wasn’t even a part of the ER area,” Combs says. Eventually, a doctor took pity on her and finagled quicker treatment. Still, several more hours passed before Combs received pain medication and learned she had a blood clot on her left lung. Sixteen hours after her arrival, hospital officials finally found a bed and admitted her.

Combs admits her ER episode initially shocked her. “I was clueless about what was going on,” she says. “The doctor kept apologizing for the overcrowding.” Fortunately, she feels she received good care during her 10-day hospital stay.

As Combs experienced, emergency-room logjams are now the norm. More people than ever rely on emergency rooms—many because they lack health insurance (including 19% of black Americans). “Our emergency room is handling double its annual capacity of 24,000 patient visits,” says Christopher Olivia, MD, president/CEO of Cooper University Hospital in Camden, New Jersey. Add industry-wide hospital closures, a shortage of ER physicians and a rise in the number of uninsured, and it’s no wonder the average emergency-room visit takes three hours and 12 minutes, according to the Centers for Disease Control and Prevention.

But if we prepare, there are steps we can take to improve the chances that we will receive quality care as quickly as possible. These tips, provided by ER insiders, can expedite medical treatment when precious moments matter most.

Know when to call 911

Call an ambulance if you or a loved one is unconscious, experiencing chest pains or stroke symptoms (such as sudden numbness or weakness on one side of the body, trouble seeing or loss

of balance), difficulty breathing, severe bleeding, vomiting or headache or any other situation that requires urgent care. The emergency medical service (EMS) personnel can administer lifesaving treatment, take you to the least crowded facility and have medical personnel there ready to treat you.

Be prepared
Write down your doctor's phone number and those of several emergency rooms in the area. Make sure to copy them clearly and keep them close to the phone where a loved one or neighbor can see them. Also, know your personal and family health info, such as histories of diabetes and hypertension. Atlanta ER physician Sheryl Heron, MD, chairperson of the National Medical Association's committee on emergency medicine, says such information "will drive our treatment decisions," help you avoid certain tests and get you cared for more quickly.

List your prescriptions
If she knows how much and which medications you're taking, "the doctor won't have to do a full patient work-up," a time-consuming procedure that involves taking a detailed medical history, says Heron.

Call ahead
If transporting yourself to the hospital, dial the ER and ask if it is on "divert" status, a code signaling EMS workers to avoid that hospital because it's too busy. You can still go there as a walk-in patient, but your wait will likely be shorter at a less-crowded facility.

Go with the slow
If the situation isn't urgent and you can delay care, some hospitals will suggest that you come in when the ER is less active. Busy periods typically include weekends, when more traumas happen; holidays, when excessive eating and drinking trigger chronic illnesses such as diabetes and hypertension; and Mondays and Tuesdays, when people who've delayed care over the weekend experience medical crises, says Heron. Still, hospitals treat their most needy patients first, so be prepared to wait if you have a less urgent concern.

Frequent the same facility
This is particularly true if you have a chronic condition. "They have your records and you're already in the system," saving valuable time, says Richard O'Brien, MD, spokesman for the American College of Emergency Physicians. "That said, it's critical that you go to the nearest hospital if you're in a life-threatening situation."

Consider urgent-care clinics
Many cities have 24-hour facilities that treat patients with non-life-threatening conditions like sinus infections, flu, earaches and minor cuts and broken bones. These facilities are often privately owned however, so they may not treat uninsured patients or those on Medicaid or Medicare. Check your Yellow Pages for more information.

Your Emergency-Room Rights

Few experiences make us feel more vulnerable than a health crisis. Being un- or underinsured or not having the money to pay for ER treatment can make the situation even more nerve-wracking. But hospitals must provide emergency-room care whether or not you can afford to pay. You have the right to:

- Timely treatment (which cannot be delayed while hospital personnel determine your insurance status or ability to pay).
- Emergency room examination and care until your condition is stabilized.
- Be admitted if your condition requires in-patient care. You can only be transferred if a doctor certifies that you'llbenefit from treatment elsewhere or you request a transfer in writing.
- Be relocated to another hospital if the current facility is unequipped to treat you and an alternate hospital specializes in your condition.
- Report a violation If you suspect a breach of the Emergency Medical Treatment and Active Labor Act (EMTALA), ask to speak with the hospital's on-duty patient representatives. You can also call your regional Center for Medicare and Medicaid Services (877-267-2323) or visit www.cms.hhs.gov/about/regions/consumers.asp.

ER Tips For Tots

You never know when a child's tumble or tummy troubles will send you scrambling to the emergency room. Following these steps can ensure your angel gets great care with minimum aggravation.

- Teach your child how to call 911 and give his name, location and description of the medical emergency.
- Write down the name and contact information of your child's pediatrician and list any medications your child is taking as well as allergies, medical conditions, immunizations and surgeries she has had. Staple a copy of your child's insurance card to it. Then label both pages clearly and post copies on your refrigerator and let caregivers and babysitters know the information is there in case of an emergency. Also, give copies to school administrators and keep one in your purse or wallet.
- Tell caregivers which hospital you typically go to and inform them of the circumstances under which you expect them to take your child there.

- If your child has a chronic illness requiring repeat ER trips, ask if the hospital allows informational visits where you can tour the emergency room together, meet the staff and, hopefully, reduce her anxiety.

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