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## Effect of Emergency Care Process Optimization on Rescue Efficiency of Emergency Patients

Huifei Wang\*

Zhejiang Sanmen County People's Hospital, Taizhou, Zhejiang, 317100, China

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ABSTRACT

**Objective:** This paper discusses the impact of emergency care process optimization on the rescue efficiency of emergency patients. **Methods:** 102 cases of emergency patients received from January 2017 to February 2018 in our hospital were selected as research objects. According to the order of treatment, they were divided into control group and observation group. The routine nursing process was given to the control group, and the observation group was given an optimized nursing process to compare the rescue efficiency and nursing satisfaction of the two groups. **Results:** According to the results of the study, the nursing satisfaction of the two groups was compared. Among them, the total satisfaction of the observation group was 49, accounting for 96.07%; the control group was very satisfied with the nursing work, accounting for 82.35%. There was a significant difference in nursing satisfaction between the two groups, which was statistically significant ( $P < 0.05$ ). Comparing the rescue efficiency of the two groups of patients, the observation time, rescue time, infusion time and disease remission time were significantly lower than the control group, the rescue success rate was 94.11%, and the rescue success rate of the control group was 78.43%. The results have statistical significance ( $P < 0.05$ ). **Conclusion:** The optimization of emergency nursing process can greatly improve the rescue efficiency of emergency patients, reduce the disability rate and mortality, improve the quality of nursing, and enhance the satisfaction of nursing. It is worthy of clinical promotion practice.<sup>[1]</sup>

### 1. Introduction

The emergency department is an important part of the hospital department. The patients received have the characteristics of rapid onset and serious illness. Medical staff should understand the patient's condition at the earliest time, do a good job of triage and res-

cue work, and the nursing process is of great significance and can directly affect the patient's life safety. The hospital should regularly organize medical staff to carry out training and study, continuously improve its knowledge level and comprehensive work ability, optimize the emergency care process, put the patient's life safety at the top posi-

*\*Corresponding Author:*

Huifei Wang,

Zhejiang Sanmen County People's Hospital,

No.176 Renmin Road, Sanmen County, Taizhou, Zhejiang, 317100, China;

E-mail: 185322840@qq.com.

tion, improve rescue efficiency and enhance nursing satisfaction.<sup>[2]</sup> In this paper, 102 emergency patients received by our hospital from January to February 2018 in 2017 were selected as research objects. According to the order of treatment, they were divided into control group and observation group, and the routine nursing process was given to the control group, while the observation group was given an optimized nursing process, and the rescue efficiency and nursing satisfaction of the two groups were compared, as reported below.

## **2. Materials and Methods**

### **2.1 General Information**

102 emergency patients received from January 2017 to February 2018 in our hospital were selected as the study subjects. They were divided into control group and observation group according to the order of treatment. The routine nursing process was given to the control group, and the observation group was given the optimal nursing process. Among them, there were 29 male patients in the control group and 22 female patients, aged 30-72 years, with an average age of  $(49.61 \pm 2.24)$  years old; there were 24 male patients in the observation group and 27 female patients, aged 25-75 years, with an average age of  $(50.64 \pm 2.31)$  years old; the time from onset to admission is 1-12h. Both groups of patients participated in the experimental research with informed knowledge. There was no significant difference in the general data ( $P > 0.05$ ), and there was comparability. This research was approved by the hospital ethics committee. Exclusion criteria: (1) the patients who died during the rescue or transshipment process; (2) the patients who had severe cardiovascular disease; (3) the patients who were not conscious and unable to communicate. (4) the patients who had severe symptoms of liver and renal insufficiency.

### **2.2 Methods**

The routine nursing process was given to the control group: the medical staff evaluated and judged the patient's condition, treated according to clinical experience, monitored the patient's vital signs in real time, and did a good job of oxygen therapy.<sup>[3]</sup> Give the observation group an optimized care process:

First, the attending doctors, head nurses, and inspectors will establish emergency care process teams, regularly train the team members, explain the characteristics of the emergency department in detail, and continuously improve their knowledge and skills. Different treatment and care programs are developed for different types of emergency patients to make them aware of their responsibilities. After the assessment, the nursing staff will be as-

sessed, and the nursing process will be carried out in strict accordance with the nursing process.

Second, medical staff must carry out shift work in strict accordance with the rules and regulations, ensure that emergency medical staff are on duty 24 hours a day, and timely carry out rescue treatment. After receiving the emergency call, it is necessary to start the car within 5 minutes. On the way of first aid, the nursing staff needs to keep in touch with the patient's family to understand the patient's condition and guide the patient's family by phone for simple first aid. The nursing staff needs to prepare medicines, utensils, etc. for emergency use. On the way back, the caregiver needs to contact the emergency room to inform the patient about the situation and prepare the emergency room for the best treatment.

Third, the medical staff should judge and evaluate the condition according to the patient's consciousness and the body function, learn the basic situation of the patient as quickly as possible, and establish an emergency green channel of "registration, rescue, payment" to enable the patient to rescue as soon as possible. After the nursing staff is notified, the flattened car will be placed at the door to greet the patient, which will help the patient get rescue as soon as possible.<sup>[4]</sup>

Fourth, nurses should give full play to their auxiliary functions, give patients oxygen therapy, establish intravenous channels, and check related functions. At the same time, medical personnel should communicate with patients, do a good job in health education, and reduce their psychological stress. Fundamentally improve the nursing process.<sup>[5]</sup>

Fifth, the nursing staff needs to regularly check the equipment in the emergency room. If abnormal conditions occur, they need to be repaired immediately, and pay attention to regular cleaning and disinfection. The nursing staff can master the use of various emergency department instruments and understand the precautions of each instrument in detail.

Sixth, nursing staff needs to increase training in psychological care. After the patients enter the hospital, they can calm the anxiety, nervousness and fear of the patients and can explain the basic knowledge of the illness to the patients, use professional knowledge to gain the trust of the patient, increase the patient's confidence in the treatment of the disease, and be able to face the disease more actively. In addition, the caregiver needs to guide the patient to self-care, thereby improving the quality of life of the patient.

### **2.3 Observation Indicators**

The nursing satisfaction and rescue efficiency of the two groups were observed.

## 2.4 Effect Judgment

The patient care service satisfaction was scored. In this experiment, 156 patients were investigated by questionnaire survey and divided into three criteria: very satisfied: 80-100 points; satisfied 60-80 points; unsatisfactory <60 points.<sup>[6]</sup> Satisfaction = (very satisfied + satisfied) / total × 100%. At the same time, the patient's condition relief time was recorded and counted, and the clinical symptoms such as chest tightness and chest pain completely disappeared as the standard.

## 2.5 Statistical Principles

In this experiment, the spss20.0 professional statistical software was used to carry out x2 test on the data of two groups of nursing satisfaction, and (%), t-test was carried out on the rescue situation, and expressed by (±s), when P<0.05, there is a significant difference in data between groups.

## 3. Results

### 3.1 Nursing Satisfaction

According to the results of the study, comparing the satisfaction of the two groups of patients, among them, the observation group's total satisfaction with nursing work was 49, accounting for 96.07%. And among them, 27 patients were very satisfied, accounting for 52.94%, and 22 patients were satisfied, accounting for 43.13%; the control group was very satisfied with the nursing work, accounting for 82.35%, of which 18 patients were very satisfied, accounting for 35.29%, and 24 patients were satisfied, accounting for 47.05%. There was a significant difference in nursing satisfaction between the two groups, which was statistically significant (P<0.05). As shown in Table 1.

### 3.2 Rescue Efficiency

According to the results of the study, comparing the rescue efficiency of the two groups of patients, the observation time of the observation group was smaller than that of the control group, and the difference between the two groups

was significant (P<0.05). The rescue time of the observation group was smaller than that of the control group, and the difference between the two groups was larger (P<0.05). The infusion time of the observation group was smaller than that of the control group, and the difference between the two groups was significant (P<0.05). The remission time of the observation group was smaller than that of the control group, and the difference between the two groups was significant (P<0.05). The rescue success rate of the observation group was 94.11%, and the success rate of the rescue group was 78.43%. The success rate of rescue in the experimental group was higher than that in the control group, and the two groups were statistically significant (P<0.05). See Table 2.

## 4. Discussion

The emergency department is one of the more concentrated departments of critically ill patients, and its condition is more complicated, which puts high demands on the treatment and nursing work. At the same time, with the change of people's ideological concepts, the awareness of rights protection has become stronger, and the optimization of emergency care process has become an inevitable trend. Through the optimization and improvement of emergency nursing measures, the development of scientific and rational work processes, and systematic treatment and nursing, not only can greatly improve the success rate of rescue, but also improve the quality of nursing work, make the nursing work more scientific and standardized, ensure the smooth development of rescue related work and enhance patient and family care satisfaction.<sup>[7]</sup> The optimization of the emergency room care process can reduce unnecessary work, reduce the work of nursing staff, improve the efficiency of care, and make the nursing work more standardized, programmed and standardized, thereby striving for more rescue time for patients to improve the success rate of rescue. Optimize the emergency room process,

**Table 1.** Nursing satisfaction of patients from two groups of [n, (%)]

Groups	Cases	Very Satisfied	Satisfied	Unsatisfied	Total Satisfaction
Observation Group	51	27 (52.94)	22 (43.13)	2 (3.92)	49 (96.07)
Control Group	51	18 (35.29)	24 (47.05)	9 (17.64)	42 (82.35)

**Table 2.** Rescue efficiency of patients from two groups of ( $\bar{x} \pm s$ )

Groups	Cases	Triage Time (min)	Rescue Time (min)	Transfusion/ Medication Time (min)	Remission Time (min)	Rescue Success Rate
Observation Group	51	0.67±0.87	40.61±5.86	5.12±2.63	42.87±8.69	94.11%
Control Group	51	2.64±1.36	53.75±4.68	9.64±3.57	90.85±9.08	78.43%

put forward higher requirements for nursing staff, need to improve the comprehensive quality of nursing staff, professional skills, clarify the duties of nursing staff, improve the responsibility of nursing staff, and thus improve the quality of care. After the patient is admitted to the hospital, the nursing staff needs to quickly assess the patient's condition and prepare the rescued drugs and instruments to improve the efficiency of the rescue.

In this paper, 102 cases of emergency patients received from January 2017 to February 2018 in our hospital were selected as research objects. According to the order of treatment, they were divided into control group and observation group. The routine nursing process was given to the control group, and the observation group was given an optimized nursing process to compare the rescue efficiency and nursing satisfaction of the two groups. According to the research results, the total satisfaction of the observation group for nursing work was 49, accounting for 96.07%; the control group was very satisfied with the nursing work, accounting for 82.35%. The observation time of the observation group was smaller than that of the control group, and the difference between the two groups was significant ( $P < 0.05$ ).

## 5. Conclusion

In summary, the optimization of emergency care process can greatly improve the rescue efficiency of emergency patients, reduce the disability rate and mortality, improve the quality of care, and enhance the satisfaction of nursing, which is worthy of clinical promotion practice.

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