An Epidemiologic Study of Emergency Department Visits before and after Executing Health Sector Evolution Plan; a Brief Report

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Abstract

Introduction: Health sector evolution plan has been developed aiming to protect people from healthcare costs and improve the quality and availability of health care services. It has been executed since May 2014 in public hospitals all over Iran. The present study was done aiming to evaluate the epidemiology of patients presenting to emergency department (ED) before and after execution of health sector evolution plan. Methods: This retrospective study was done in June 2013 and June 2015 in ED of Shohadaye Tajrish Hospital, Tehran, Iran. A group of 400 was randomly selected from those admitted to general (non-trauma) ward of the ED in each time span. The clinical profiles of the patients were retrieved from the archives and reviewed by the researcher. A pre-designed checklist consisting of age, sex, marital status, route of visit, type of illness, and decision-making status was filled for each case. Results: The number of patients presenting to ED of Shohadaye Tajrish Hospital in June 2013 and June 2015 was 3275 and 3872, respectively. Mean age of the studied patients was 51.4 ± 16.7 (59.2% male) before, and 53.7 ± 18.4 (56.5% male) after execution of health sector evolution plan. No significant difference was detected regarding age (p = 0.72), sex (p = 0.43), and marital status (p = 0.76) before and after execution of health sector evolution plan. Route of visit to ED had not significantly changed (p = 0.36) and although a slight increase was seen in cancer-related visits after execution of the plan, the pattern of visits regarding type of illness had not changed (p = 0.10). However, there was a significant change in decision-making status for discharging the patients (p < 0.001). Conclusion: It seems that although the number of visits to ED has increased after execution of health sector evolution plan, patients’ age, sex, marital status, route of visit and pattern of visits regarding type of illness has not changed dramatically. However, a significant change has occurred regarding decision-making status for patient discharge.

Keywords: Delivery of health care; emergency department; epidemiology, patient admission