

ORIGINAL ARTICLE

Evaluation of Performance Indexes of Emergency Department

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Abstract

Introduction: The importance of evaluating performance indicators in the emergency department, as one of the most important departments of hospital, is obvious to everyone. Therefore, in this study we aimed to appraise the five performance indicators, approved by the ministry of health, in Shohadaye Tajrish hospital, Tehran, Iran. **Methods:** In a descriptive cross-sectional study based on the profiles of all the patients admitted to the emergency department, performance indicators in the emergency department were evaluated. The study was divided into 2 parts about the establishment of emergency medicine system and training the medical staff: the first 6 months of 1392 and the second. Then these 2 periods were compared using Mann-Whitney U test while $P < 0.05$ was considered as the level of significance. **Results:** Of the studied indicators, mean triage time was 6.04 minutes in the first 6 months which was reduced to 1.5 minutes in the second 6 months ($p=0.016$). In addition, the percentage of patients who moved out of the department in 12 hours was lowered from 97.3% in the first period to 90.4% in the second ($p=0.004$). While, the percentage of patients who were decided upon in 6 hours ($p=0.2$), unsuccessful CPR percentage ($p=0.34$) and patients discharged against medical advice ($p=0.42$) showed no significant difference. **Conclusion:** The results of this study showed that the establishment of the emergency medicine system in the emergency department could lead to more efficient triage. Due to the differences made after their establishment including: different pattern of the patients admitted, increased stay of the patients in the department due to their need for prolonged intensive care, a raise in patient referral to the hospital by pre-hospital services and a higher percentage of occupied hospital beds, other indicators have not shown a significant improvement.

Key words: Emergency department performance index; emergency medicine; patient discharge; triage