



HOSPITAL EMERGENCY ROOM DASHBOARD

MONTHLY VIEW

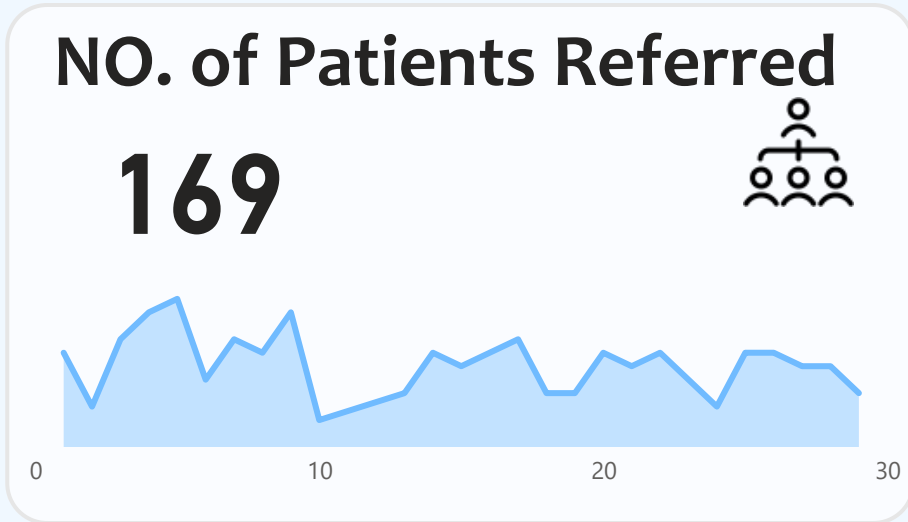
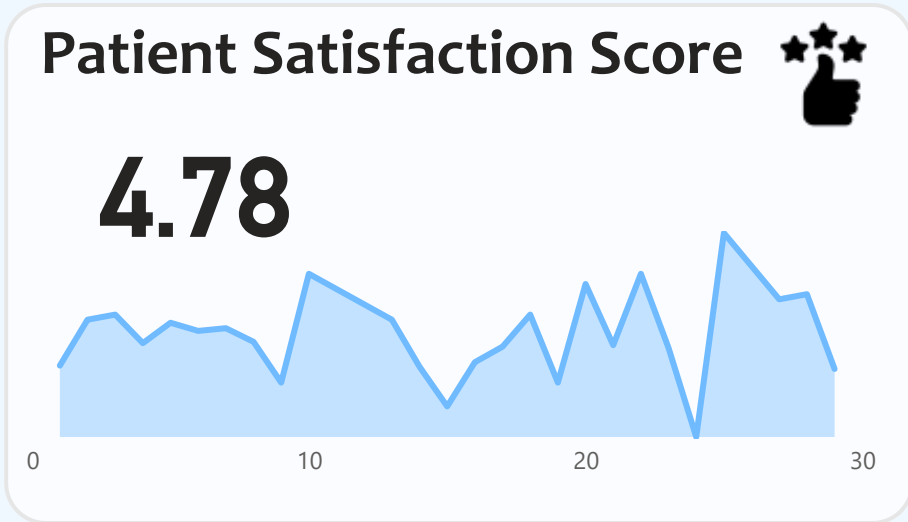
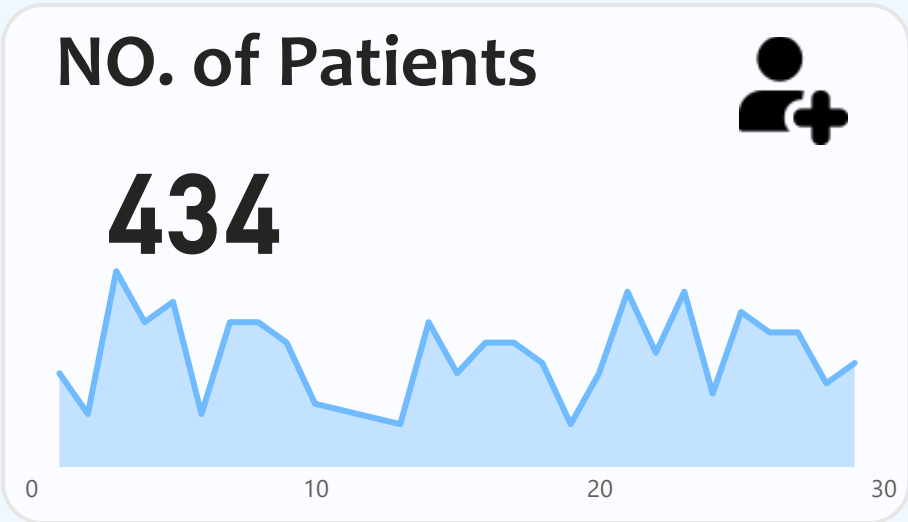
Feb 2024

Year

2024

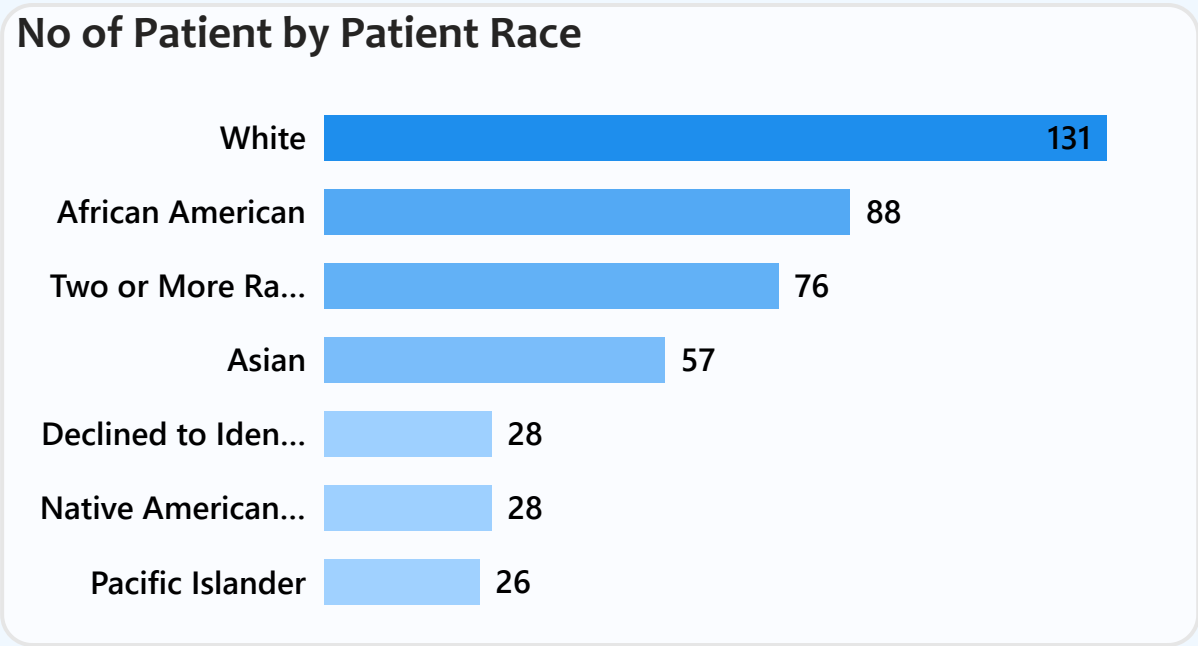
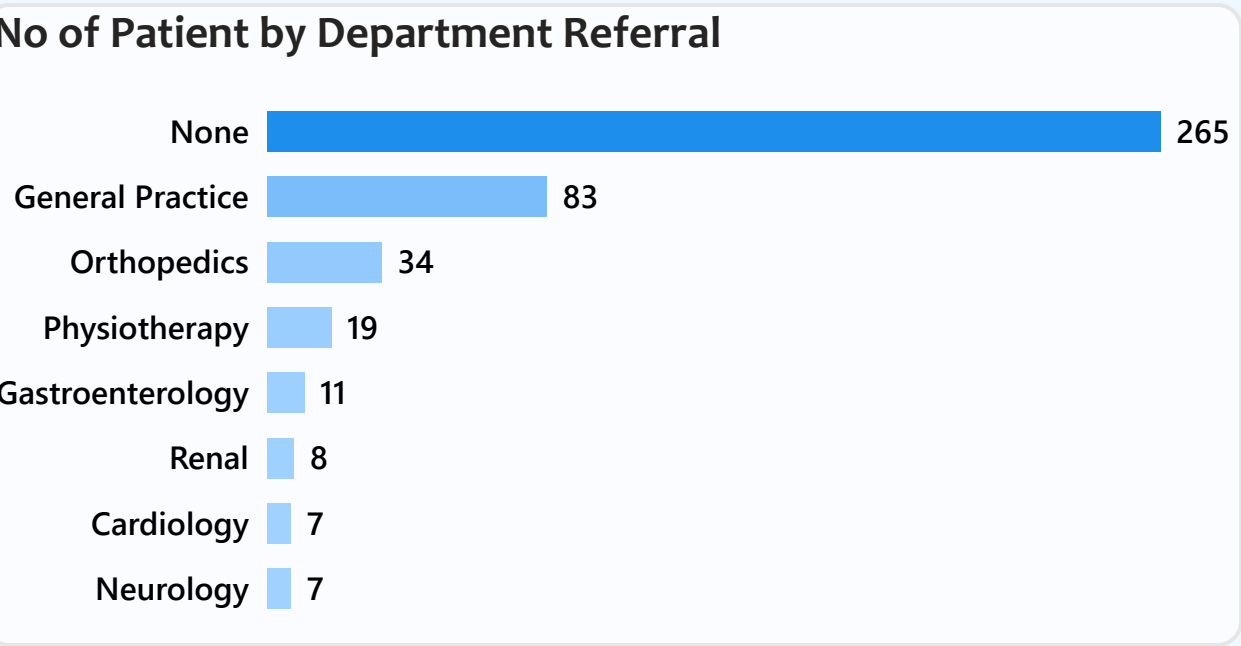
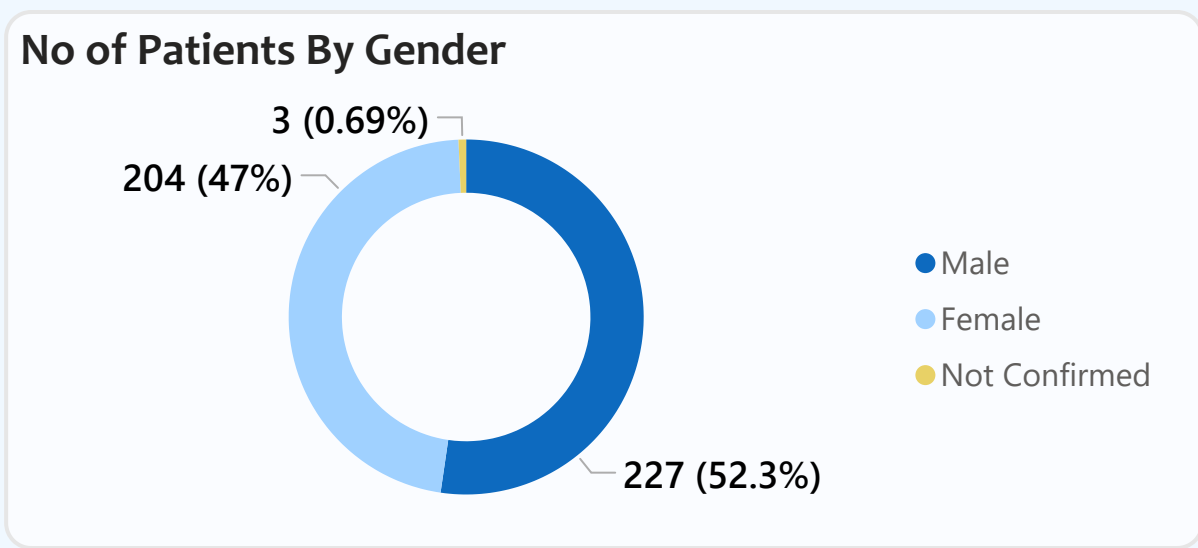
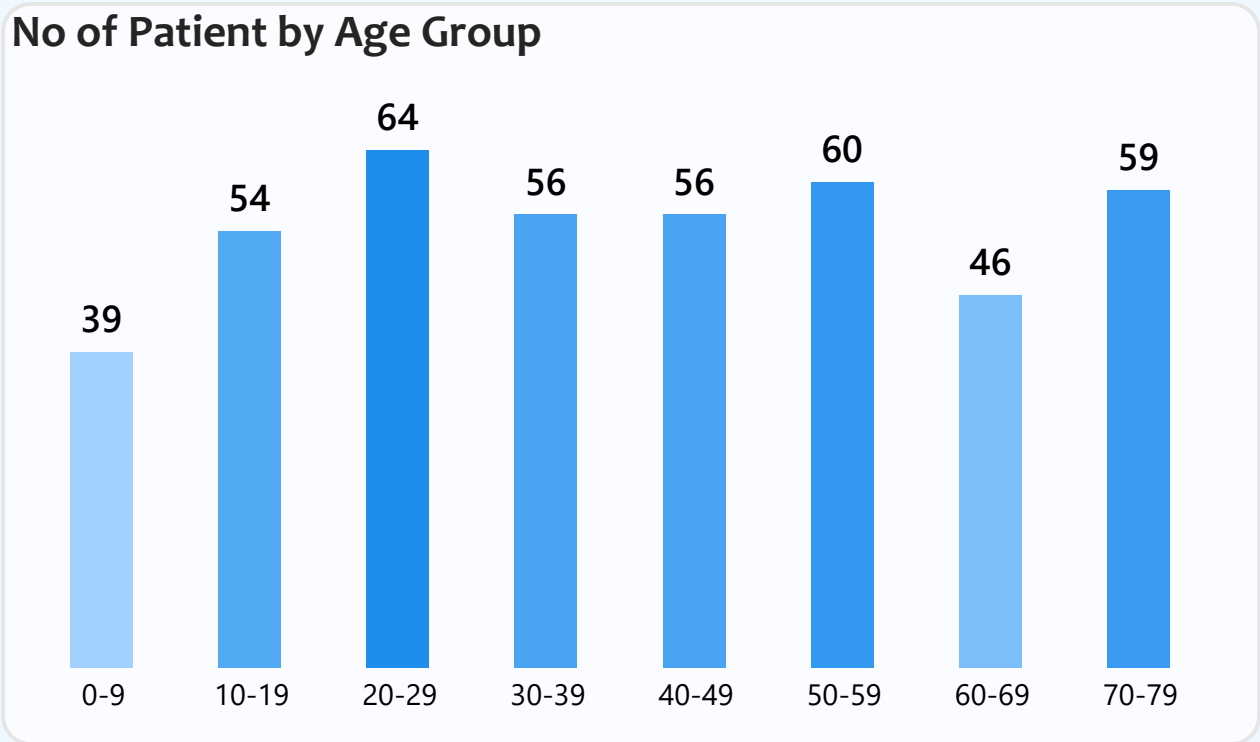
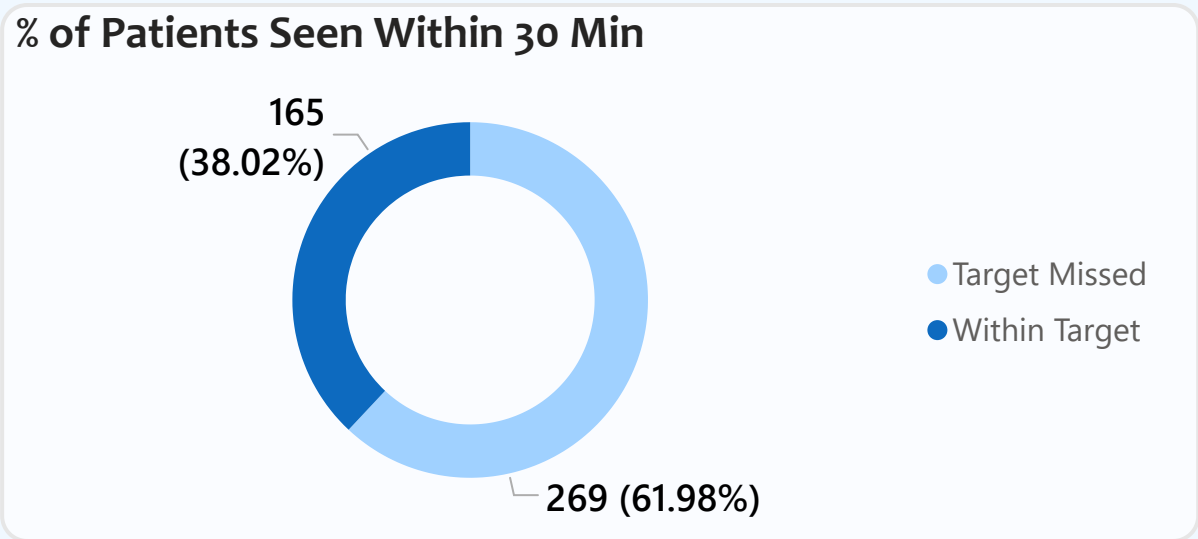
Month Name

Feb



Patient Admission Status

Admission Status	Patient	% Total
Not Admitted	210	48.39%
Admitted	224	51.61%



No of Patient by Day and Hour

Hours	Mon	Tue	Wed	Thu	Fri	Sat	Sun
00-02	5	3	6	6	7	3	5
03-04	4	3	4	9	5	4	
05-06	4	8	7	4	6	6	7
07-08	5	5	5	5	2	7	2
09-10	1	3	6	9	2	7	2
11-12	4	4	4	3	6	3	8
13-14	4	6	7	7	3	4	3
15-16	5	2	9	5	4	6	9
17-18	3	3	5	12	6	6	3
19-20	5	3	5	7	7	5	4
21-22	4	5	8	5	9	6	4
23-24	4	6	7	6	9	7	7

MENUE

Monthly View

Consolidated View

Patient Details

Key Takeways

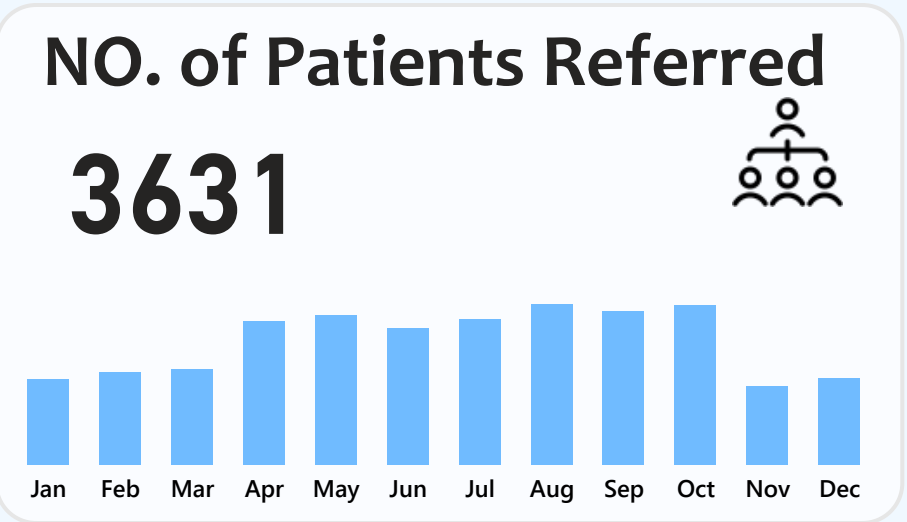
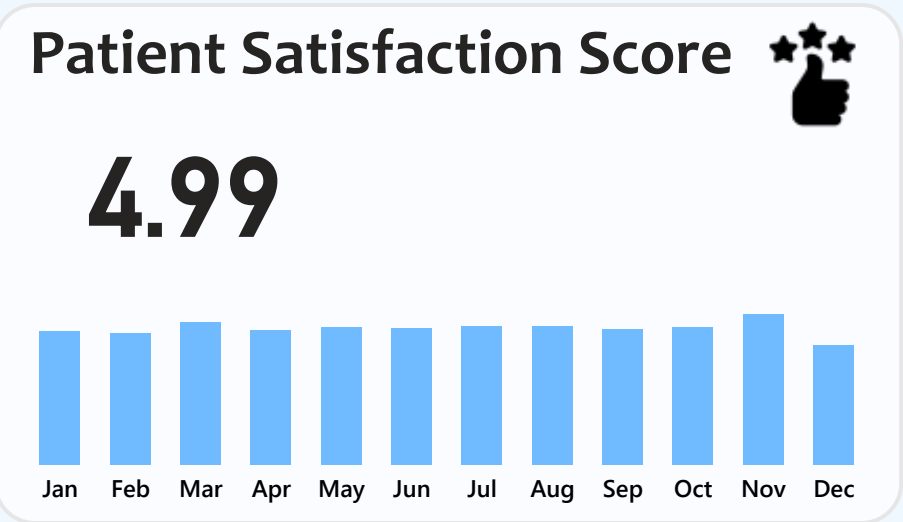
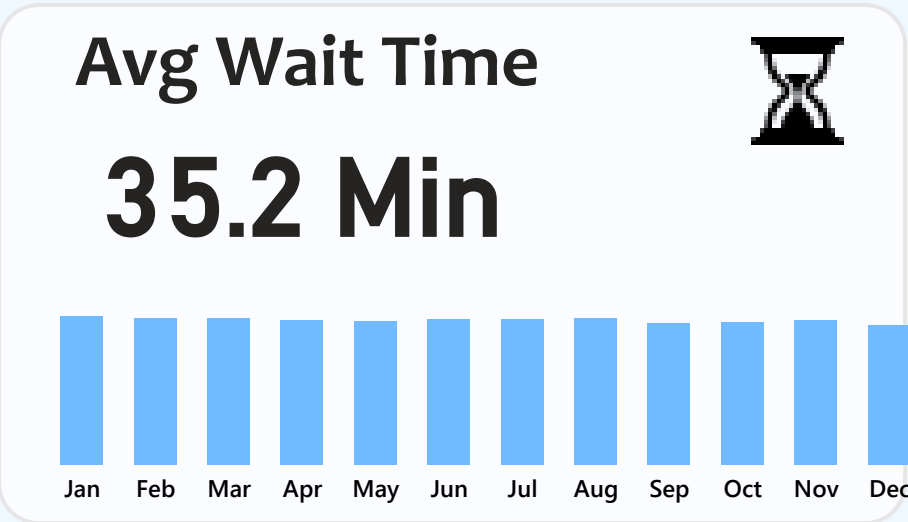
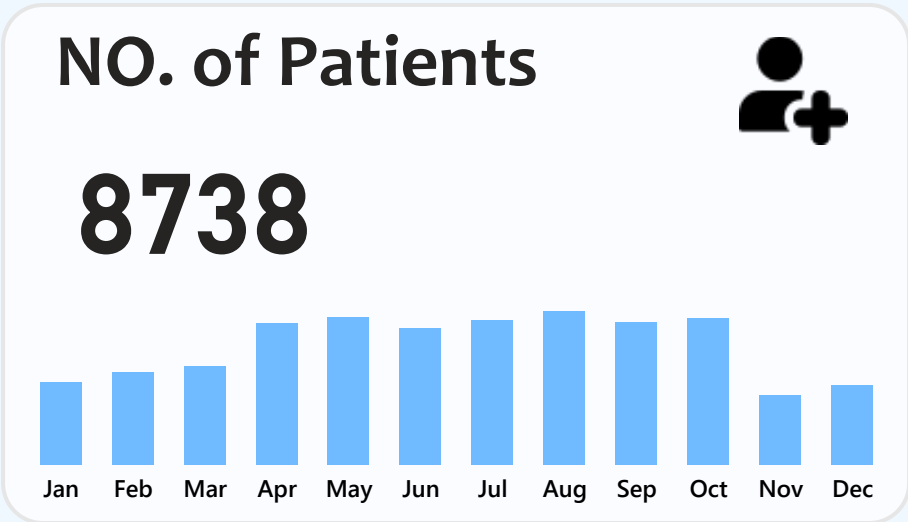


HOSPITAL EMERGENCY ROOM DASHBOARD

COVSOLIDATED VIEW

1/29/2023

10/30/2024



MENUE

Monthly View

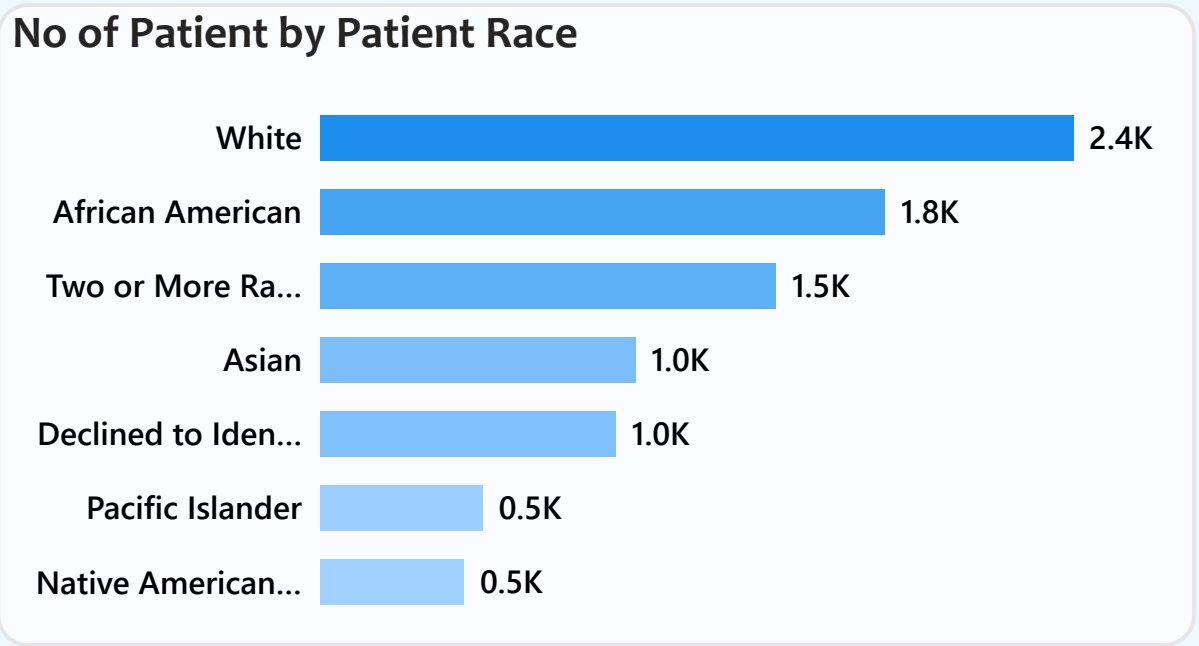
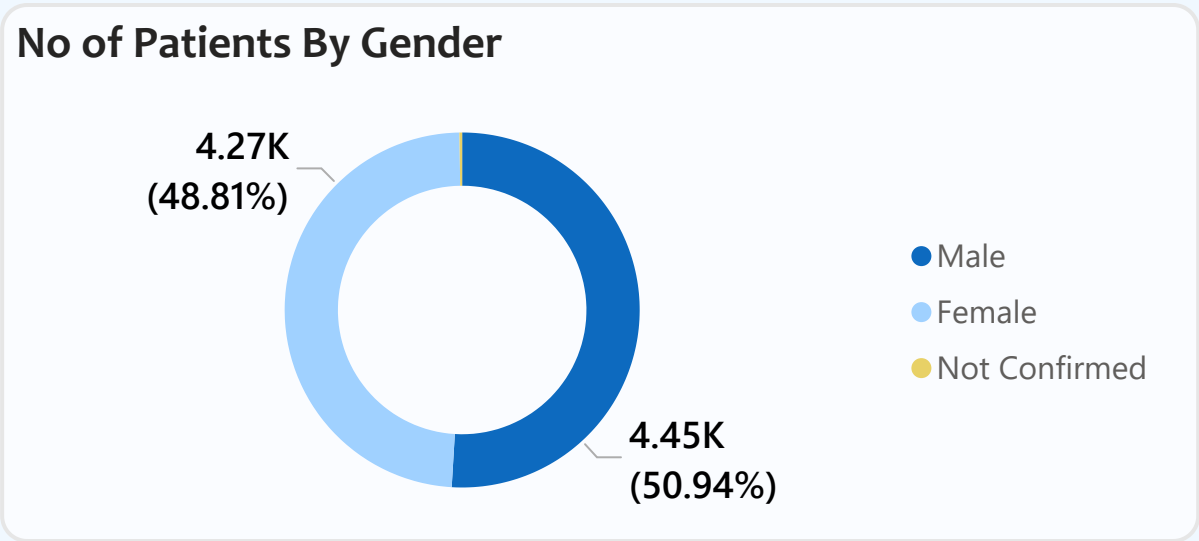
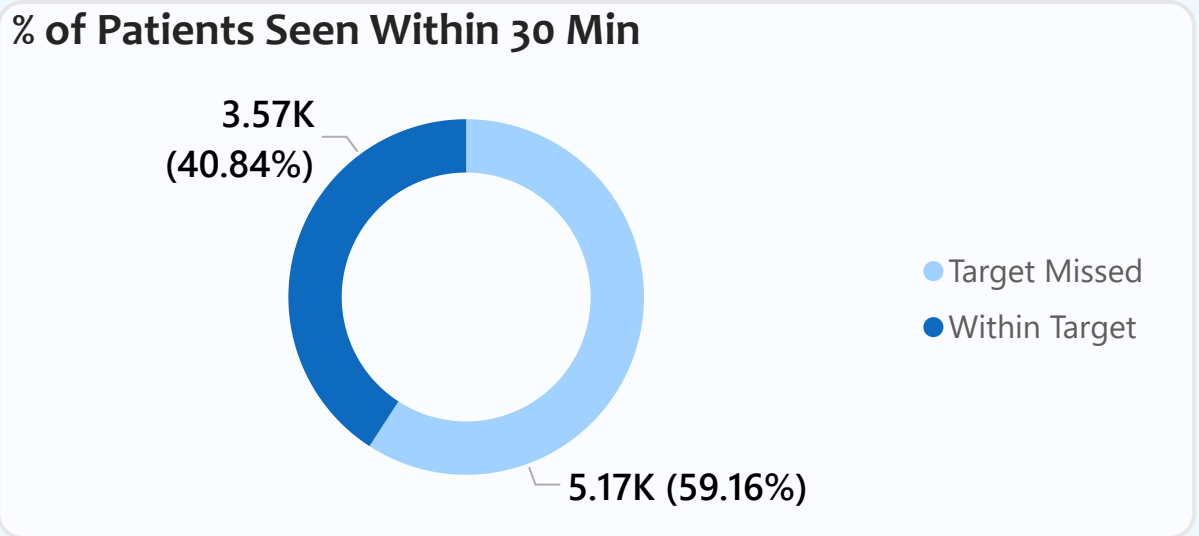
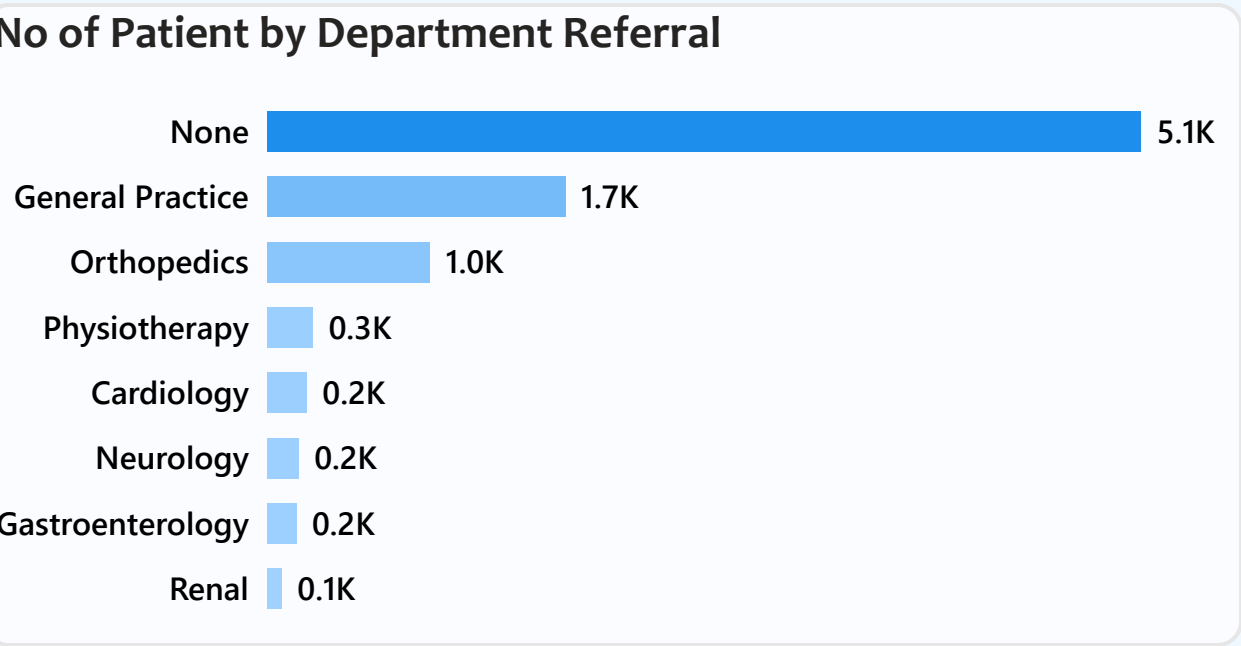
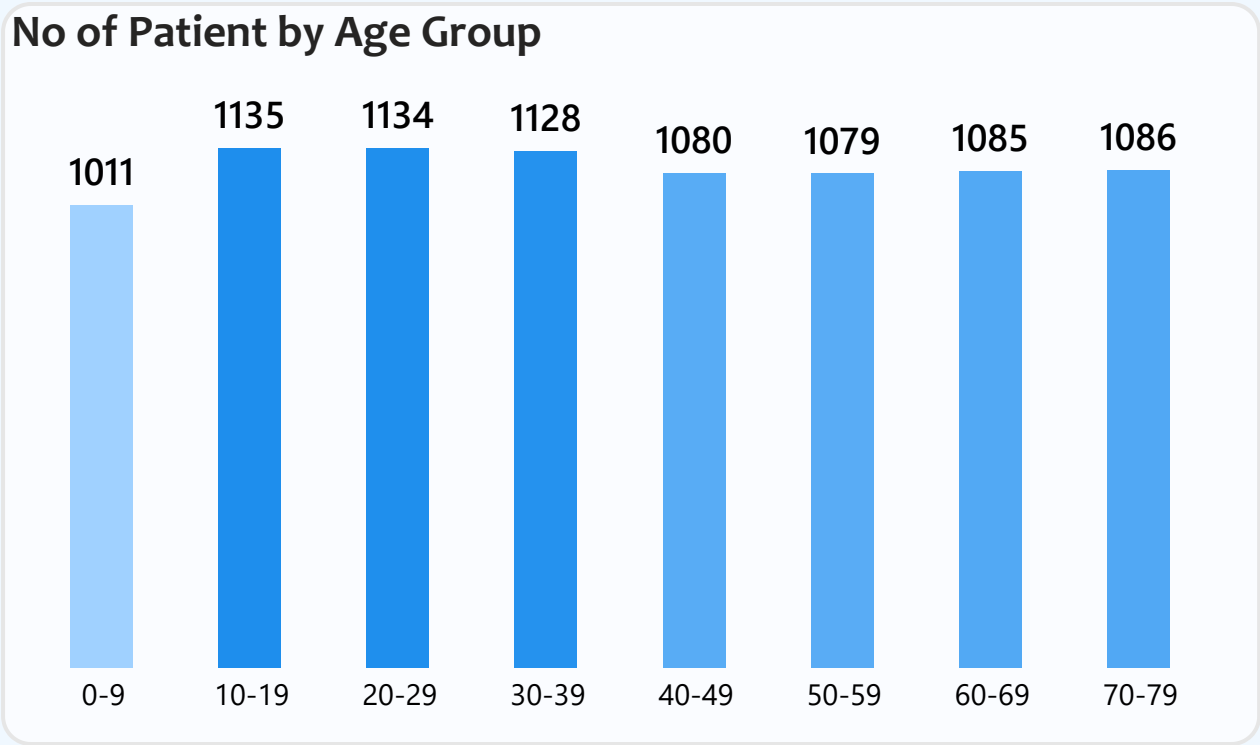
Consolidated View

Patient Details

Key Takeways

Patient Admission Status

Admission Status	Patient	% Total	
Admitted	4361	49.91%	<div></div>
Not Admitted	4377	50.09%	<div></div>



No of Patient by Day and Hour

Hours	Mon	Tue	Wed	Thu	Fri	Sat	Sun
00-02	99	105	106	88	115	108	112
03-04	100	112	99	89	106	125	98
05-06	118	118	105	105	88	112	101
07-08	98	115	119	114	108	88	99
09-10	96	112	114	107	85	113	98
11-12	108	97	108	98	93	116	93
13-14	113	105	106	88	103	119	98
15-16	97	90	108	89	100	110	132
17-18	106	108	83	109	102	93	103
19-20	97	87	92	108	107	107	111
21-22	110	96	97	108	87	94	121
23-24	94	117	128	101	104	116	106

HOSPITAL EMERGENCY ROOM DASHBOARD

PATIENT DETAILS

1/1/2024

6/30/2024

Patient Id	Patient Name	Patient Gender	Patient Age	Patient Admin Date	Patient Race	Patient Waittime	Department Referral	Admission Status
100-17-5081	V Flicker	Male	67	14 January, 2024	African American	60	None	Not Admitted
100-21-9648	W Marran	Female	39	17 January, 2024	Pacific Islander	22	None	Admitted
100-34-6753	B Paulus	Male	43	13 May, 2024	Pacific Islander	25	General Practice	Admitted
100-34-9587	U Lamburn	Male	20	4 January, 2024	Declined to Identify	24	Neurology	Not Admitted
100-66-0896	I Prickett	Male	2	26 March, 2024	African American	23	Orthopedics	Admitted
100-70-0071	R Downham	Male	38	14 January, 2024	African American	57	None	Not Admitted
100-72-5705	N Dudny	Female	60	19 June, 2024	African American	45	None	Admitted
100-79-0109	P Ulyatt	Female	19	27 February, 2024	Pacific Islander	36	Neurology	Admitted
101-35-3930	W Andreotti	Female	30	24 January, 2024	White	25	None	Admitted
101-60-5189	G Georger	Female	45	8 April, 2024	White	43	None	Not Admitted
101-66-4553	R Odd	Female	14	30 March, 2024	Two or More Races	57	General Practice	Admitted
102-24-8249	A Staples	Male	2	3 January, 2024	African American	27	General Practice	Not Admitted
102-54-1653	J Mowson	Female	50	27 April, 2024	African American	51	Orthopedics	Not Admitted
102-60-4609	Y Rutt	Female	52	17 January, 2024	Declined to Identify	60	General Practice	Not Admitted
102-73-6494	M Wogdon	Male	65	13 January, 2024	Two or More Races	59	None	Not Admitted
102-85-6993	A McCumskay	Male	67	24 March, 2024	African American	30	None	Not Admitted
102-93-0960	F Lyddiard	Female	47	28 April, 2024	Declined to Identify	35	General Practice	Not Admitted
103-34-3477	B Meanwell	Male	25	18 April, 2024	African American	34	None	Not Admitted
103-36-3561	U Shuttlewood	Male	17	18 May, 2024	African American	49	Physiotherapy	Admitted
103-94-9474	S Ronald	Female	68	9 March, 2024	African American	30	Orthopedics	Admitted
104-61-0458	I Licciardo	Male	46	26 March, 2024	Declined to Identify	45	General Practice	Not Admitted
105-30-2335	E Pinnell	Female	13	20 May, 2024	White	38	Orthopedics	Admitted
105-85-2242	J Enos	Male	27	27 March, 2024	African American	33	None	Not Admitted
106-06-0564	Q Mountlow	Male	16	14 January, 2024	Declined to Identify	22	Orthopedics	Admitted
106-19-1978	V Course	Female	34	6 June, 2024	Two or More Races	21	General Practice	Admitted
106-25-8604	J Ebbins	Female	35	13 June, 2024	White	59	None	Admitted
106-76-9218	E Ruggiero	Male	20	28 February, 2024	White	40	None	Admitted
106-88-8888	W Mearns	Male	3	17 May, 2024	Declined to Identify	21	General Practice	Admitted



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Consolidated View

Patient Details

Key Takeways



HOSPITAL EMERGENCY ROOM DASHBOARD

KEY TAKEAWAYS

Descriptive Analysis

(April2023 - October 2024)

The emergency room dataset, covering a period of 19 months, records a total of 9,216 unique patients.

Patient Wait Time & Satisfaction:

The Average wait time was approximately 35.2 minutes, indicating a need for improvement to enhance patient flow. The average satisfaction score was 4.99 out of 10, suggesting moderate satisfaction and highlighting areas for improving patient experiences.

Departmental Referrals:

The significant number of Patients (5000) did not required referrals, Among those referred, the most common were General Practice (1700 cases) and Orthopedics (900 Cases), followed by Physiotherapy (276 Cases) and Cardiology (248 Cases).

Peak busy Period:

The busiest day were Saturday (1248 Patients), Tuesday (1237 Patients), and Wednesday (1233 Patients). The busiest hours were 11AM, 7PM, 01PM, and 11PM indicating need of ample staffing during these periods.

Patient Demographics:

Age Groups: Adults (30-39 Years) formed a large group (1089 Patents), followed by young adults (20-29 Years) with 1092 Patients. Other significant groups included middle aged as well (40-50 Years).

Race Distribution:

The largest racial group was White(2471), followed by African American(1851), multi racial(1457), and Asian(1000)patients. A significant number of Patients(900) declined to identify their race.

Admission Patterns:

Nearly half of the patients (4612) were admitted, while the rest (4604) were treated and released.

Summary:

The dataset reveals high patient volumes, moderate satisfaction levels, and common referrals to General Practice and Orthopedics. Monday and late night to early mornings hours are particularly show a diverse age and racial composition, with nearly equal numbers of admitted patients. These insights can help optimize resource allocation and improve patient care in the emergency room.

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Key Takeaways