

UNIVERSIDAD NACIONAL MAYOR DE SAN MARCOS

FACULTAD DE MEDICINA HUMANA

UNIDAD DE POS GRADO

Estudio Aleatorio de Tiempos de Espera de Pacientes Según Niveles de Prioridad

ANEXOS

TESIS Para optar el título de SEGUNDA ESPECIALIZACIÓN EN MEDICINA DE EMERGENCIAS Y
DESASTRES

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ANEXOS

FICHA INDIVIDUAL

FECHA Y **HORA DE ENTRADA** :

Nombre y apellidos :

Edad :

Sexo :

Procedencia :

Persona que condujo al paciente :

Servicio :

FECHA Y **HORA DE ASISTENCIA MEDICA** :

Molestia principal :

Dolor : Leve

Tiempo de enfermedad :

Moderado

Severo

Antecedentes patológicos :

Constantes fisiológicas : Presión arterial=

Pulso =

Respiración =

T ° =

Glasgow :

Condición clínica :

Diagnóstico presuntivo / definitivo :

FECHA Y **HORA DE SALIDA** :

NIVEL DE PRIORIDAD : I II III IV V

Tabla I. Percentil de cumplimiento		
Nivel	Percentil de cumplimiento ¹	Tiempos de atención/asistencia
I	98%	Inmediato
II	85%	Inmediato enfermería/7 minutos médicos
III	80%	15 minutos
IV	75%	30 minutos
V	70%	40 minutos
1 Percentil de cumplimiento de un nivel o categoría de triaje: Porcentaje de pacientes dentro de ese nivel de triaje que han de ser atendidos / visitados en el tiempo de atención/asistencia establecido.		

Tabla II. Percentil de cumplimiento marginal		
Nivel	Percentil de cumplimiento marginal ¹	Tiempos de atención/asistencia
I	100%	7 minutos
II	95%	7 minutos enfermería/15 minutos médicos
II	100%	15 minutos enfermería/20 minutos médicos
III	85%	20 minutos
III	90%	30 minutos
III	100%	45 minutos
IV	85%	60 minutos
IV	100%	120 minutos
V	80%	120 minutos
V	100%	240 minutos
1 Percentil de cumplimiento marginal de un nivel o categoría de triaje: Porcentaje de pacientes dentro de ese nivel de triaje que han de ser atendidos / visitados en el tiempo de atención/asistencia establecido a pesar de quedar fuera del percentil de cumplimiento.		



The Canadian E.D. Triage and Acuity Scale

Patients should have an
INITIAL TRIAGE ASSESSMENT WITHIN 10 MINUTES*
of arrival



TRIAGE LEVEL I - RESUSCITATION

Time to NURSE
Assessment
IMMEDIATE*



Time to PHYSICIAN
Assessment
IMMEDIATE*

USUAL PRESENTATION

Code / Arrest
Major Trauma
Shock States
Near Death Asthma
Severe Respiratory Distress
Altered Mental State (unconscious, delirious)
Seizures

SENTINEL DIAGNOSIS

Traumatic Shock
Pneumothorax - Traumatic / Tension
Facial Burns with Airway Compromise
Severe Burns > 30% TBS
Overdose with Hypotension / Unconscious
AAA
AMI with Complications / CHF / Low BP
Status Asthmaticus
Head Injury - Major / Unconscious
Status Epilepticus

TRIAGE LEVEL II - EMERGENT

Time to NURSE
Assessment
IMMEDIATE*



Time to PHYSICIAN
Assessment
15 MINUTES*

USUAL PRESENTATION

Head Injury (Risk Features ± Altered Mental State)
Severe Trauma

Altered Mental State (lethargic, drowsy, agitated)
Chemical Exposure - Eyes
Allergic Reaction (Severe)
Chest Pain • Visceral, Non-Traumatic
• ± Associated Symptoms
Overdose (conscious), Drug Withdrawal
ABD Pain (Age >50) with Visceral Symptoms
Back Pain (Non Trauma, Not MSK)
GI Bleed with Abnormal Vital Signs
CVA with Major Deficit
Asthma Severe (PEFR <40%)
Moderate / Severe Dyspnea / Difficulty Breathing
Vaginal Bleeding • Acute, Pain scale >5
• ± Abnormal Vital Signs
Vomiting and/or diarrhea
(with suspicion of dehydration)
Signs of serious infection (purpuric rash, toxic)
Chemotherapy or immunocompromised
Fever (age ≤ 3 months) Temp ≥ 38.0 (rectal)
Acute Psychotic Episode / Extreme Agitation
Diabetes: Hypoglycemia, Hyperglycemia
Headache (Pain Scale 8 - 10/10)
Pain Scale 8-10 (CVA, Back, Eye)
Sexual Assault
Neonate (≤ 7 days old)

SENTINEL DIAGNOSIS

Head Injury
Trauma, Multiple Sites, Multiple Rib Fracture,
Neck Injury / Spinal Cord

Alkaline / Caustic Occular Burns
Anaphylaxis
AMI, Unstable Angina, CHF, Chest Pain NOS,
Gastroesophageal Reflux
Unspecified Drug / Medicinal Overdose, "d.t.'s"
AAA, Appendicitis, Cholecystitis

Gastrointestinal Bleed, Hypotension
CVA
Severe Asthma
COPD, Croup
Spontaneous Abortion
Ectopic Pregnancy / Rupture

Epiglottitis, Meningitis, Sepsis
Acute Psychotic Episode / Agitation
Hypoglycemia, Diabetic Ketoacidosis, Hyperglycemia
Migraine
Renal Colic, LBP / Strain (Disc), Keratitis, Iritis

TRIAGE LEVEL III - URGENT

Time to NURSE
Assessment
30 MINUTES*



Time to PHYSICIAN
Assessment
30 MINUTES*

USUAL PRESENTATION

Head Injury, Alert, Vomiting
Moderate Trauma

Abuse / Neglect / Assault
Vomiting and/or diarrhea (≤ 2 years)
Dialysis problems
Signs of Infection
Mild / Moderate Asthma (PEFR > 40%)
Mild / Moderate Dyspnea
Chest Pain • No Visceral Symptoms (Sharp/MSK)
• No Previous Heart Disease
GI Bleed with Normal Vital Signs
Vaginal Bleeding Acute, Normal Vital Signs
Seizure, Alert on Arrival
Acute Psychosis ± Suicidal Ideation
Pain Scale 8 - 10 / 10 with minor injuries
Pain Scale 4 - 7 / 10 (Headache, CVA, Back)

SENTINEL DIAGNOSIS

Head Injury
Anterior Dislocated Shoulder, Tibia / Fibula Fracture,
Bimalleolar, Trimalleolar Ankle Fracture

Pyelonephritis
Asthma without Status / COPD
Bronchiolitis / Croup, Pneumonia
Chest Pain NOS (MSK, GI, Resp)

GI Bleed, No complications
Spontaneous Abortion
Seizure
Acute Psychosis ± Suicidal Ideation

Migraine, Renal Colic, LBP / Strain (Disc)

TRIAGE LEVEL IV - LESS URGENT

Time to NURSE
Assessment
60 MINUTES*



Time to PHYSICIAN
Assessment
60 MINUTES*

USUAL PRESENTATION

Head Injury, Alert, No Vomiting
Minor Trauma
ABD Pain (Acute)
Earache
Chest Pain, Minor Trauma or MSK, No Distress

Vomiting and diarrhea (>2 years/no dehydration)
Suicidal Ideation / Depression
Allergic Reaction (Minor)
Corneal Foreign Body
Back Pain (Chronic)
URI Symptoms
Pain Scale 4 - 7
Headache (Non Migraine / Not Sudden)

SENTINEL DIAGNOSIS

Head Injury, Alert, No Vomiting
Colles Fracture, Ankle Sprain
Appendicitis, Cholecystitis
Otitis Media / Otitis Externa
Chest Pain NOS (MSK, GI, Resp),
Gastroesophageal Reflux

Suicidal Ideation / Depression
Urticaria
Corneal Foreign Body
LBP / Strain
URI

TRIAGE LEVEL V - NON URGENT

Time to NURSE
Assessment
120 MINUTES*



Time to PHYSICIAN
Assessment
120 MINUTES*

USUAL PRESENTATION

Minor Trauma, Not Necessarily Acute
Sore Throat, No Resp Symptoms
Diarrhea alone (no dehydration)
Vomiting alone normal mental status
(no dehydration)
Menses
Minor Symptoms
ABD Pain (Chronic)
Psychiatric complaints
Pain Scale < 4

SENTINEL DIAGNOSIS

LBP / Strain
URI
Gastroenteritis
Vomiting
Disorders of Menstruation
Dressing Changes
Cast Changes
Constipation
Symptoms / Neurotic, Personality and
Nonpsychotic Mental Disorders
Unspecified Superficial Laceration(s)

* **TIMES TO ASSESSMENT** are operating objectives, not established standards of care. Facilities without onsite physician coverage may meet assessment objectives using delegated protocols and remote communication.

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