1. Triage: The vital signs of the patient are filled by the nurse (the patient is physically present at the emergency room or his vital signs are shared via radio by the ambulance crew. Most patents will be passed to another area of the department or another area of the hospital with their waiting time determined by their clinical need. The patients with serious conditions, such as cardiac arrest, will bypass triage altogether and move straight to the appropriate part of the department.
2. Resuscitate Area: Trauma/Resus Area is key area in most departments. The most seriously ill or injured patients will be dealt with in this area.
3. Acute Care or Majors: Pateints who exhibit signs of being seriously ill but are not in immediate danger of life or limb will be triaged to acute care. Physician will do thorough assessment. Advanced diagnostic testing (CT scan/ MRI/ blood test) is done at this stage.
4. Prompt Care or Minors: Patients with not immediately life-threatening conditions will be sent to this area. Examples: Fractures, dislocations, lacerations.

Source: <https://en.wikipedia.org/wiki/Emergency_department>

ER for Heart Patients: (Search term- what happens with a heart attack patient in emergency room)

1. <http://www.webmd.com/heart-disease/what-to-expect-in-the-er>
2. <http://www.heartsite.com/html/heart_attack3.html>
3. <http://www.propublica.org/article/how-long-will-you-wait-at-the-emergency-room>