



# HOSPITAL EMERGENCY ROOM DASHBOARD

## Key Takeaways

Monthly View

Consolidated View

Patient Detail

Key Takeaways



## Descriptive Analysis

(April 2023 - 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 **35.3 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:

A significant number of Patients (5400) did not require referrals. Among those referred, the most common were **General Practice (1840 cases)** and Orthopedics (995 Cases), followed by Physiotherapy (276 Cases) and Cardiology (248 Cases).

### Peak Busy Periods:

The busiest days were **Mondays (1377 Patients)**, Saturdays (1322 Patients), and Tuesdays (1318 Patients). The busiest hours were 11 AM, 7 PM, 01 PM, and 11 PM, indicating the need for ample staffing during these periods.

### Patient Demographics:

**Age Groups:** Adults (**30 - 39 Years**) formed a large group (**1200 Patients**), followed by young adults (20 - 29 Years) with 1188 Patients. Other significant groups included middle-aged individuals as well (40 - 50 Years).

### Race Distribution:

The largest racial group was **White (2571)**, followed by African American (1951), Multiracial (1557), and Asian (1060) patients. A significant number of patients (1030) 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. Mondays and late-night to early-morning hours are particularly busy. The patient demographics show a diverse age and racial composition, with nearly equal numbers of admitted and non-admitted patients. These insights can help optimize resource allocation and improve patient care in the emergency room.