

HEALTH & SAFETY: THE EMERGENCY ROOM

“After Discharge from the Emergency Room”

BQIS/Outreach Fact Sheets provide a general overview on topics important to supporting an individual’s health and safety and to improving their quality of life. This is the third of three Fact Sheets regarding Managing Emergency Room Visits.

Objectives

Reader will understand what actions to take after the person is discharged from the emergency department to home.

Definitions

Baseline: Usual state of alertness or consciousness.

Facts

- Designated agency staff should be identified to inform members of the interdisciplinary support team (IST), including guardian/health care representative, of changes in person’s status, ER visits and outcomes from emergency care.
- Failure to implement recommendations and monitor the person’s health status after visiting the emergency room can lead to more severe complications and health issues including death.

Recommended Actions and Prevention Strategies

1. Discuss any new orders or recommendations with the individual, answer questions at a level appropriate to the individual’s comprehension and offer support as necessary.
2. Ensure timely administration of medications, food, fluids, and hygiene care is provided as necessary and as consistent with emergency room discharge instructions.
3. Notify the nurse/supervisor or other personnel per agency policy of the outcome of the emergency room visit and discuss any new orders or recommendations and upcoming appointments/procedures.
4. The identified designated person should communicate outcome of the emergency room visit with the support team.

5. Support team addresses any issues/barriers regarding implementation of recommendations.
6. A designated person should take prescriptions to the pharmacy or deliver per agency policy. Be sure you have a copy of the prescription for the person's medical record.
7. Ensure there is a method to follow up and ensure needed medications or supplies are delivered in a timely manner and what action is needed in the event they are not, including notifying the prescriber/healthcare provider.
8. Purchase supplies necessary to implement treatments/recommendations.
9. Transcribe any medication orders to the Medication Administration Record per agency policy ensuring that they are double checked by another staff person as soon as available.
10. Transcribe all orders for monitoring and observation, treatments, and notifications to a treatment sheet so that all staff are aware of the supports that are required for the person's health issue. Ensure that the transcription is double checked by another staff.
11. Ensure designated person provides staff training as necessary for new treatments and/or medications.
12. Mark any new appointments or scheduled procedures on the person's daily calendar.
13. Ensure a designated person completes revisions to the Risk plan as necessary or develops a new risk plan including plans for following up on the person's status until problem resolves or stabilizes to guide staff for delivery of care; and that the Interdisciplinary team is involved in full implementation of any new or revised risk plan.
14. Follow agency policy or physician order for monitoring if sedated prior to or during ER visit. This should include at least the following:
 - ambulating with assist
 - do not offer food or drink by mouth until the person returns to baseline.
15. Document events that occurred before, during and after the emergency room visit per agency protocol including any necessary incident reports.

Learning Assessment

Questions that can be used to verify a person's competency in the material contained in this Fact Sheet:

1. True or False: It is best practice to have someone double check all medication and treatment orders that are transcribed.
2. True or False: All new medications can wait to be started the next day.
3. True or False: If the person comes home on the week-end it is OK to wait until Monday to train everyone on new orders and treatments.

References

Conrad Stoppler, Melissa, MD, Shiel, William C., Jr., MD, FACP, FACR. Emergency Room Visit - Twelve Things You Need to Know. www.medicinenet.com/script/main/art.asp?articlekey=55573
Freeman Health System. Visiting the Emergency Room. www.freemanhealth.com/erjoplin

Related Resources

Emergency Room Series Fact Sheets: “Preparing for and During the Emergency Room Visit”, “During Discharge from the Emergency Room”

Emergency Room Series Checklists: “Preparing for and During the Emergency Room Visit”, “During Discharge from the Emergency Room”, “After Discharge from the Emergency Room”

Learning Assessment Answers

1. True
2. False
3. False

Outreach Services

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As a service for persons supporting individuals with intellectual/developmental disabilities, BQIS/ Outreach developed the Outreach Fact Sheet Library. The information provided is designed to enhance the understanding of the topic and does not replace other professional or medical instructions or individually developed plans. For more fact sheets and information, please visit DDRSOutreach.IN.gov.



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