

## MEMO: UMass Memorial University Campus Emergency Room Changing Ambulance Intake Procedure:

Background: The Adult Emergency Room at University Campus had opportunity for improvement in offloading EMS. This delay in offloading caused delays in EMS returning to the community, sending patients to triage without a formal assessment or EKG, and causing an increase in foot traffic and in the department.

Action: Adult ED Leadership team, WEMS, & ER staff came together to develop a formalized process for patients arriving by Ambulance, calling it Ambulance intake.

### Process:

- Patient enters with EMS through the Ambulance Bay
- Patient is registered and a chart is generated
- Patient is brought to the Flow desk.
- Flow determines if there is an appropriate available space, if there is not the patient is sent to Ambulance Intake.
- The Ambulance Intake Nurse greets EMS in Ambulance intake; it is discussed if the patient can sit in a wheelchair/ chair or must be placed in a stretcher.
- Ambulance Intake RN, takes a full report from EMS.
- EMS exits the department.
- The Ambulance intake nurse completes the full triage along with the appropriate triage interventions.
- Based on the patient assessment and Triage, the Ambulance Intake Nurse determines if the patient is appropriate to sit in the Waiting Room. If they are appropriate, they are escorted via Wheelchair to the waiting room by a staff member. If they are not appropriate, the Ambulance Intake notifies the Flow RN the need for a spot.

EMS Exit: When this area is congested and busy, we are encouraging EMS to exit through the hall by the CT scanner, down the “Egress” hallway and out to the Ambulance Bay. We are aware that not all EMS services have access to be able to badge out the door. We ask that in the time being you ask an employee for assistance.

Trial started Monday 1/22. There will be a re-evaluation process 30 and 90 days after Go-Live.

For any feedback feel free to Contact Kristin Dulmaine, Assistant Nurse Manager,  
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