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Dear All, Thank You

If you want to see “Teamwork” in action at the Tzu Chi hospital, the Emergency Room (ER) is a good place to start. If you need to understand how different units work together as one unit, please try visiting the ER room.

During the Lunar Chinese New year, almost every outpatient service is closed, except for the 24 hours around-the-clock ER service. A handful of medical staff sacrifices their time to serve during the holidays. The demand for such service typically surges to three to four times the regular volume.

One’s man’s meat is another man’s poison. Even our peer function as one team, we all have our own specialty. It is important to share experience because it will only cross pollinate and complement each other in our profession. The inpatient department doesn’t necessarily understand how we operate. For instance, they question the limited advance notice in receiving the new patients from the ER, and the less than perfect job of cleaning the patient. After actually working with us side by side, they understand our particular environment and appreciate the opportunity to assist. Emergency room is very unpredictable and patients generally are in dire medical condition. We can’t wait for the cleaning personnel because of a sudden surge in patients, so we do the work ourselves; it may not be thorough but we take care the immediate crisis.



Area 4 was activated during a surge in patients during the New Year holidays. With limited resources, the nursing staff was severely tested in an emergency.

The ER room has four beds and a capacity to receive twelve patients at one time. At times, patients outnumber the capacity and we make room in the corridors, and the waiting rooms. When

more beds are needed, our team leaders become creative in solving our problem.

Those who have volunteered service in the ER department understand the difficulties we are facing. We like to give

patients the highest quality care possible, such as cleaning the patients before transferring to in-patient service. At times, it might not be feasible because of the situation. We prioritize tasks and work the most critical and urgent. Some tasks like cleaning the patients might have to be deferred to the in-patient service. I sincerely thank everyone for their understanding and support, and your comments are invaluable for better quality care to the patients.

We learned quite a few things from colleagues who came to assist. For example, techniques in the specialty care for the terminally ill patients can be applied to the ER, the ICU division taught us to be patience, and the in-patient service shared with us the most efficient way to quarantine germs. Many of the procedures are borne out of custom or habit, rather than necessity and requirement. Through communication and exchange of ideas, we discover the nest practice and customize them to meet specific situation. Starting my practice in the surgery department, to the intensive care unit, I learned a lot from different peer in different environment. Cross training is vital in Nursing for it helps individuals on their jobs and allows individuals to grow.

The ER department is extremely busy this year. During the first week of the Lunar New Year, patients increased by 50 to 100 per day, as compared to last year. After the New Year's holiday, patients surged for three consecutive weeks, forcing the

opening of waiting area 3 and 4 (see notes). Waiting area 4 is the corridor between the ER and the family waiting room. When the separating doors are closed, beds can be positioned on both sides to accommodate patients. Even when area 4 is filled, the guest area at the entrance or the pediatric emergency waiting area can also be quickly turned into additional ER waiting areas. Of course, we don't expect this to happen but in case of an emergency, adequate emergency planning ahead of time can prove to be helpful.

Each person in the ER room has only two hands among many patients. With the help of brothers and sisters from other units, who willingly gave up their precious personal time, just like Sahasrabhujā-Sahasranetra (Kuanyin with a thousand arms), the challenge is met with love and teamwork.

Thank you! Thank you all!

Note: ER waiting room is divided into 4 different quadrants. Area 1, 2 and 3 are activated when there is a surge in patients. Area 4 is the corridors along the specially designed ER, when activated can serve as additional waiting area.