Agreement for Emergency Medicine Patients needing Gastroenterology procedures (non-GI bleed)

Background:
The Emergency Department often has patients who require urgent upper endoscopy for esophageal foreign bodies and/or foreign body ingestions. It is frequently most expedient to sedate these patients in the Emergency Department however suitability for ED sedation and ED nursing and provider availability can be limiting factors. Additionally, it is recognized that backwards patient flow from the OR PACU is inefficient.

Opportunity:
Improving patient access to ED sedation and upper endoscopy for straightforward esophageal foreign bodies is desirable. Creating patient pathways for discharge from the PACU and inpatient admission from the PACU for patients requiring observation stays will ease ED throughput and be most expedient for patients.

Criteria:

1. The ED will allow Gastroenterology faculty to sedate patients only for esophageal food impactions. The ED will commit to prioritize these sedations within our capacity. Selection of appropriate sedation candidates will be at GI faculty discretion. We will perform these in the Resuscitation bay. ED nurses will administer medications for the sedations upon GI physician orders.

2. All foreign body ingestions and high risk patient sedations for esophageal food impactions will be taken to the OR for sedation/general anesthesia. As most foreign body ingestions will generally require a subsequent period of observation, most will require medicine/family medicine observation admission orders which can be placed from the PACU or occur prior to leaving the ED the procedure.

3. GI will develop an efficient system for patient discharge directly from the PACU for any patient taken to the OR who does not require admission. Patients will not be returned to the ED from the OR.

4. During weekdays and during daytime hours, patients may be transported to the GI suite and returned to the ED for appropriate disposition (admission or discharge).

Dr. Thomas Ma  
Division Chief  
Gastroenterology

Dr. Steve McLaughlin  
Chair  
Department of Emergency Medicine

Dr. Michael Gavin  
Gastroenterology

Dr. A. Robb McLean  
Vice Chair of Clinical Operations  
Department of Emergency Medicine

Rev 8/16