

A service of the U.S. National Library of Medicine and the National Institutes of Health

My NCBI [?] [Sign In] [Register]

All Databases PubMed Nucleotide Protein Genome Structure OMIM PMC Journals Books
Search PubMed for [] [Go] [Clear] [Advanced Search]

Limits Preview/Index History Clipboard Details

About Entrez
Text Version

Entrez PubMed

Overview
Help | FAQ
Tutorials
New/Noteworthy
E-Utilities

PubMed Services

Journals Database
MeSH Database
Single Citation Matcher
Batch Citation Matcher
Clinical Queries
Special Queries
LinkOut
My NCBI

Related Articles,
Links

Note: Performing your original search, *ems radio report*, in PubMed will retrieve [7 records](#).

Display Abstract Show 20 Sort By Send to

All: 1 Review: 0

1: [Prehosp Emerg Care. 2003 Apr-Jun;7\(2\):204-8.](#)

A time-motion study of ambulance-to-emergency department radio communications.

[Penner MS](#), [Cone DC](#), [MacMillan D](#).

Division of EMS, Section of Emergency Medicine, Yale University School of Medicine, New Haven, Connecticut, USA.

Related Resources

Order Documents
NLM Mobile
NLM Catalog
NLM Gateway
TOXNET
Consumer Health
Clinical Alerts
ClinicalTrials.gov
PubMed Central

OBJECTIVE: A prospective time-motion study of radio communication between inbound ambulances and emergency department (ED) triage personnel was conducted to assess hospital triage staff time utilized, and how often radio reports result in actions taken in the ED to prepare for patient arrival. The study hypothesis was that reports for "priority 2" (P2, nonemergent) patients rarely provide information that is acted upon in the ED prior to the patient's arrival. **METHODS:** The study was conducted at an academic adult ED receiving 22,000 ambulances per year. An observer in the ED monitored and timed (to the second) all radio reports as well as the activities of triage nurses and arriving emergency medical services (EMS) personnel. **RESULTS:** A convenience sample of 437 reports was collected: 83 priority 1 (P1, emergent) and 354 P2. Average report times (minutes:seconds) with ranges were 0:53 (0:07-1:57) for P1, and 0:44 (0:04-3:50) for P2. Only 16% of the P2 reports resulted in any preparatory action, and 55% of these were requests to have hospital police officers available to receive intoxicated patients, as per local protocol. An in-person report was given in the ED for 61%

of the P2 cases, and in 48% of these, the in-person report was longer than the radio report. **CONCLUSIONS:** In the system studied, P2 reports rarely provide information that is acted on prior to the patient's arrival. The time spent giving a radio report is frequently duplicated in the ED. Radio reports for low-priority patients may not be an efficient or productive use of providers' or nurses' time.

Publication Types:

- [Evaluation Studies](#)

PMID: 12710779 [PubMed - indexed for MEDLINE]

Display	<input type="text" value="Abstract"/>	Show	<input type="text" value="20"/>	Sort By	<input type="text" value="Send to"/>
---------	---------------------------------------	------	---------------------------------	---------	--------------------------------------

[Write to the Help Desk](#)
[NCBI](#) | [NLM](#) | [NIH](#)
 Department of Health & Human Services
[Privacy Statement](#) | [Freedom of Information Act](#) | [Disclaimer](#)