

THE ORANGE COUNTY
REGISTER

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SUNDAY MORNING READ

**MONITORING
THE PATIENT:**

A 14-month-old girl cries as she is poked and prodded by emergency-room staff at St. Joseph Hospital. The seriousness of the case forced doctors to declare a "pediatric code critical."



LEONARD ORTIZ, THE REGISTER

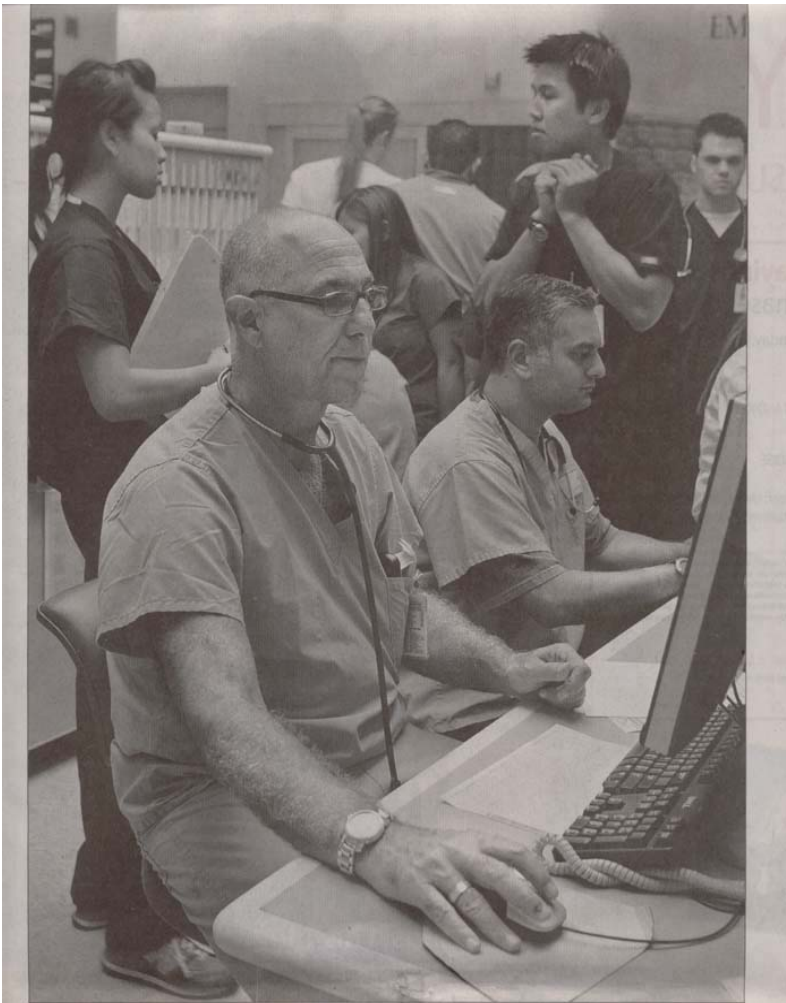
ST. JOSEPH'S STARS OF ER

"Time is muscle," emergency-room doctors and nurses say, referring to the speed needed to save a dying heart. Time is many other things inside Orange County's busiest emergency room - and the third busiest in the state. Peace and quiet are rarities as the beds and chairs are filled and emptied, and quickly filled and emptied again throughout the day.

St. Joseph Hospital in Orange for the first time allowed a reporter and photographer to spend some time in its ER, which sees about 99,000 patients a year.

STORY BY GREG HARDESTY & PHOTOS BY LEONARD ORTIZ

NEWS 16



ORGANIZING CHAOS: Dr. Paul Sheikewitz, left, and Dr. Ameer Moody work on computers amid hospital staff and patients. PHOTOS: LEONARD ORTIZ, THE REGISTER

CRASH CART TO ER, STAT

At St. Joseph's emergency room - O.C.'s busiest - doctors and nurses fight to make time stand still.

By GREG HARDESTY
THE ORANGE COUNTY REGISTER

ORANGE - The mountain biker with the gash on his arm takes a seat where the woman in the car crash had just been, just feet from where the baby girl with a fever squirms on the examination table.

That's when things get interesting in Orange County's busiest emergency room.

A nurse at St. Joseph Hospital in Orange grabs a 14-month-old from the arms of her grandmother and dashes from the lobby into the ER.

"Pediatric code critical," a calm-voiced woman says over loudspeakers. "Nonresponsive."

A 10-person team of doctors, nurses and assistants

jams into the room. Members hook up the limp girl to a monitor, start

like St. Joseph's - which treated nearly 99,000 patients last year in



CLOSE CALL: A distraught grandmother holds her granddaughter after bringing her to St. Joseph's emergency department after the 14-month-old was limp and unresponsive.

jams into the room. Members hook up the limp girl to a monitor, start an IV and begin giving her oxygen.

The distraught grandmother squeezes in. A nurse outside the room sees the look of despair on the woman's face.

"Somebody ask her if she wants some water," the nurse says. "She looks like she could use a drink."

Another code critical - this time for an adult - is announced as, minutes later, cops bring in a suicidal 13-year-old boy in handcuffs.

"My God," a receptionist at the main ER desk says. "Is it Friday? Is it Monday?"

Indeed, what time was it?
 ER time.

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Time is a constant theme running through ERs. And these days, ERs are running out of time.

With more people flooding into emergency departments as the number of ERs declines, hospitals

like St. Joseph's - which treated nearly 99,000 patients last year in its 57-bed ER - are striving to more efficiently move patients through their doors.

Tight budgets and a nursing shortage aren't helping - a shortage that persists despite national marketing campaigns like Emergency Room Nurses Week, which starts today.

"We don't have all the answers, but we're trying," says Dr. James E. Pierog, medical director of St. Joseph's emergency medical services.

Time is on the minds of everyone who works in the ER, as doctors, nurses and their assistants strive to make a science out of efficiency.

At St. Joseph's, patient forms are meticulously arranged by symptom, and "scribes" in black scrubs - many of them pre-med

CLOSE CALL: A distraught grandmother holds her granddaughter after bringing her to St. Joseph's emergency department after the 14-month-old was limp and unresponsive.



ON CALL: After being involved in a car accident, Katie White, 19, left, makes a call on her cell phone as Sheikewitz examines an X-ray of her foot.



BUSY ROOM: The entrance to St. Joseph's emergency department, where nearly 99,000 ER patients visited last year.

"We don't stop - we just keep moving."

MICHAEL VICIOSO
 PEDIATRIC NURSE MANAGER

SEE PAGE 17

NO REST FOR ER'S WEARY

FROM PAGE 16

students - shadow doctors and take notes for them.

Technicians roll X-ray machines and computers down shiny floors, where doctors make diagnoses on the run.

Inside an employee break room, coffee gurgles in a pot. Bottles of hot sauce crowd a table.

Anything to get an edge.

"We don't stop - we just keep moving," pediatric nurse manager Michael Vicioso says.

Time, in the ER, also is sound, as in the beeping of a heart monitor.

Is the heart beating fast enough? Can it keep up with time?

Time also is written on the faces of patients and their relatives, like the distraught grandmother.

Through the moving bodies of standing adults, she can see her black-haired granddaughter lying on her back, tubes attached to her.

Can doctors save the girl? Is there enough time?

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Nearly half of St. Joseph's ER patients are kids, since the



SOOTHING SOUNDS: Harpist Barbara Schilling plays near the entrance of St. Joseph Hospital's emergency department to help keep the atmosphere calm.

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Nearly half of St. Joseph's ER patients are kids, since the hospital also serves patients at neighboring Children's Hospital of Orange County.

Last year, there were 4,050 paramedic runs to the hospital - more than 11 per day.

Although it's not one of Orange County's three trauma centers, traumatic scenes are routine. "We try to take chaos and turn it into order," ER nursing director John Senteno says.

Critical to St. Joseph's push to speed treatment is a triage area set up last fall, just outside the doors leading to the ER.

A doctor, a nurse and their assistants are assigned to triage during peak hours (2 to 10:30 p.m.) to quickly assess patients with relatively minor problems, thus keeping beds open for the most critical patients.

Called RADIT, for Rapid Assessment Discharge in Triage, the system has helped keep St. Joseph's average total visit duration in the ER to about 2 hours and 15 minutes for children and a bit longer for adults, Pierog said.

Those numbers compare favorably to national averages. In 2003 and 2004, the average total visit duration for U.S. hospitals that see more than 50,000 patients a year was 3 hours and 37 minutes, according to a study by the National Center for Health Statistics.

"We throw a ton of resources trying to make people happy here," Pierog says. "The problem is getting people moved through the system. The front door of the hospital is where it starts.

"In our own internal studies, the No. 1 complaint from patients still is the wait time."

Waiting is the flip side of the oft-heard ER mantra "time is muscle," referring to the speed at which doctors must work to save a patient whose heart is failing.

So, to help the time go faster, St. Joseph's has created some distractions.

Video games keep kids occupied in the waiting area of the pediatric wing. A musician comes once a week to play her walnut-and-maple folk harp.

Barbara Schilling usually sets up near the large, oval-shaped central station that is the nerve center of the ER - a bustling hub of paperwork and

SOOTHING SOUNDS: Harpist B

computers where doctors' orders are processed and patient charts are shuffled, assessed and filed.

As a 2-year-old boy suffering from nausea sobbed from a nearby room, Schilling plays "It's a Small World" and the Irish folk tune "Danny Boy."

Molly Shelton, 68, who came to the ER complaining of weakness, thanks Schilling.

"It's extraordinary," Shelton says. "It's so civilizing, in an environment that is so hostile to the spirit."

Also in the spirit of killing time, "child life specialists" roam the ER's pediatric wing, giving children videos, board games and coloring books.

They calm children who are about to get shots. They tell them the needle is a Barbie straw that helps their body get a drink of water.

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The 14-month-old girl in the packed ER room cries.

And cries.
A good sign, though tests still have to be done to see what's wrong with her.

The girl's mother is on her way to the hospital.

Nurses and doctors soon leave the room. The grandmother cradles her granddaughter. They are alone.

The critical time is over. Now there is waiting.

About four hours later, the 14-month-old is discharged in fine health.

Citing patient confidentiality laws, St. Joseph's does not disclose why the girl fell ill.

Her case is just one of the average of 275 that the ER sees on a typical day. And this day still has several hours to go.

Dr. Paul S. Shelkowitz, an ER veteran of 30 years, makes his rounds. He diagnoses a man with a painful muscle strain in his back and two female car-accident victims with minor injuries.

What appears to be a busy caseload is routine for an old pro like Shelkowitz. But don't expect him to say "the Q word."

Nobody who works here ever does.

Because in the ER, things are never quiet.

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TINY PATIENT: A 10-month-old girl with a fever receives care in the emergency department's Rapid Assessment Discharge in Triage. The program seeks to process non-emergency cases more quickly.