Management of Medical Emergency Patients in Danish Emergency Departments

Activation criteria, training, and composition of trigger teams

Supplementary Material

Appendix 1: Questionnaire

□: 100-200

The aim of this study is to investigate differences in the management of high acuity medical emergency patients (MEP) in emergency departments in Denmark.

MEP are often received as "red call", "orange call", "acute medical call" etc.

This questionnaire examines medical trigger team activation criteria, along with training and composition of the trigger teams in Danish hospitals receiving MEP.

Hospital:	Department	:	
Role: I: Head of department I: Senior physician I: Physician I: Head nurse I: Nurse			
Courses you have participated in or are cert □: ALS (advanced life support) □: AMLS (acute medical life support) □: ATLS (acute trauma life support) □: PHTLS (prehospital trauma life support) □: Other:	□:<1 year □:<1 year	e since comple :<1 year :<2 years :<2 years :<2 years :<2 years :<2 years	□:<2 years □: Other □: Other □: Other □: Other
Does a medical trigger call exist in your dep □: Yes (If yes: How many types exist () □: No □: Do not know		ney denoted (re	ed call, acute medical call etc.:
Are trigger calls received by a trigger team? ☐: Yes ☐: No (if no: How do you receive critically ill		gency patients	:
☐: Do not know Are there multiple trigger teams? ☐: Yes (If yes: How many types exist ()) ☐: No ☐: Do not know	and how are th	ney denoted (S	TEMI, Stroke, Trauma, etc)?
Who activates the medical trigger team(s)? □: Coordinating nurse □: Secretary □: Other () □: Do not know			
How many trigger team activations does you ☐: 10-50 ☐: 50-100	ur department լ	participate in a	nnually?

□: 200-300 □: >300
What is your trigger team experience? (Number of trigger team activations you participated in during the last year): □: 0 □: 1-10 □: 11 - 30 □: 31-50 □: >50
Does the trigger team composition differ in the evening/night/weekend/holidays? □: Evenings (How:) □: Nights (How:) □: Weekends (How:) □: Holidays (How:) □: No □: Do not know
Do you keep a database on trigger team activations? □: Yes □: No □: Do not know
Do you evaluate your trigger team performance? □: Yes (If yes, how and how often:) □: No □: Do not know
Do you conduct regular simulation training? □: Yes □: Hands-on (How often:) □: Video (How often:) □: Other (How often:) □: No □: No □: Do not know
On a scale from 1-5 how adequately trained do you feel for your role in the trigger team? □: 5 I feel very adequately trained □: 4 I feel somewhat adequately trained □: 3 I sometimes feel inadequately trained □: 2 I often feel inadequately trained □: 1 I never feel adequately trained
Which activation criteria are used for activating this call? (Fill in separately for each trigger call)

Trigger team composition (fil	l in separate forms if more teams exist):	
Type of medical call:	· · · · · · · · · · · · · · · · · · ·	
Person: leader	Educational level:	Who is trigger team
□: Emergency physician	□Junior physician □Attending physician □Senior physicia	ın
□: Anaesthesiologist	□Junior physician □Attending physician □Senior physicia	เท
□: Internal medicine physicia	an □Junior physician □Attending physician □Senior phys	ician
□: Radiologist □	□Junior physician □Attending physician □Senior physicia	เท
□: Anaesthesiology nurse	(No:)	
□: ED nurse	(No:)	
□: Laboratory Technician	(No:)	
□: Service ass.	(No:)	
□: Secretary	(No:)	
□ : Radiographer	(No:)	
Other medical specialties pro		
	□Junior physician □Attending physician □Senior physicia	an 🗖
: :	□Junior physician □Attending physician □Senior physicia	an 🗖
O:	□Junior physician □Attending physician □Senior physicia	an 🗖

Appendix 2

Table: Overview of interpersonal agreement on key questions on MEP calls

Columns 1 and 5 are general questions. Columns 2-4 are regarding MEP calls. The MEP trigger calls are underlined.

	Names of all trigger calls of the department	Team leader	Who activates the MEP call	Activations of MEP calls, n	Type and frequency of training
Hospital 1					
Senior physician	Medical emergency call 1 Medical emergency call 2 Bleeder call Trauma Thrombolysis call 1 Thrombolysis call 2 Meningitis call Narcoticizing fasciitis call	Emergency physician	Coordinating nurse	>300	Hands-on team training >Every other year
Nurse	Medical emergency call 1 Medical emergency call 2 Bleeder call Meningitis call Narcoticizing fasciitis call	Medical senior physician	Coordinating nurse	200-300	Hands-on team training >Every other year
Hospital 2					
Senior physician	Critical call >12 Critical call <12 Thrombolysis call Trauma	Medical senior physician	Coordinating nurse	100-200	Hands-on team training Every six months Video training Every six months
Physician	Critical call Thrombolysis call Trauma	Shared leadership	Coordinating nurse	Do not know	Hands-on team training Do not know how often Video training Do not know how often
Nurse	Emergency call adults Emergency call children Thrombolysis Trauma Cardiac arrest call	Medical senior physician	Nurse (other)	>300	Hands-on team training Do not know how often Video training Do not know how often
Hospital 3					
Senior physician 1	Acute call Cardiac arrest call Trauma	Emergency physician	Coordinating nurse	>300	Hands-on team training Every six months
Senior physician 2	Acute call Cardiac arrest call Trauma	Emergency physician	Coordinating nurse	>300	Hands-on team training Every six months
Hospital 4					
Senior physician	Red call	Anesthesiologist	Not stated	50-100	Does not receive training
Nurse	Medical emergency call 1 Cardiac arrest call Trauma	Shared leadership	Triage nurse or flow master (other)	200-300	Does receive training Type and frequency not stated
Hospital 5					
Senior physician	Medical red call Surgical red call Trauma Critically ill pregnant Critically ill baby	Medical senior physician	Coordinating nurse	>300	Not stated

Nurse	Critically ill child				Does not receive training
	Cardiac arrest call	No MEP call	No MEP call	No MEP call	-
	Trauma	stated	stated	stated	

Appendix 3

Table: Overview of interpersonal agreement on MEP trigger team composition

x represents the number of personnel from each profession. Bold capital X represents the team leader. The nurse of hospital 5 stated that there is no trigger call for MEP.

	Emergen cy physicia n	Anesthe siologist	Internal medicin e physicia n	Other medical specialti es	Anesthe siology nurse	ED nurse	Medical laborato ry technici an	Radiolo gy technici an	Secretar y	Servic e
Hospital 1										
Senior physician	X x	х			х	xx	х	Х	Х	Х
Nurse	XX	х	Х		х	xx	Х	х	х	х
Hospital 2										
Senior physician		Х	Х	Х	Х	XX	xx		х	
Physician		X	Х		х	х	х	х	х	
Nurse		х	Х		х	х	х		Х	
Hospital 3							1		1	l.
Senior physician 1	Х					xx	Х		X	
Senior physician 2	Х					xx	х		х	
Hospital 4										
Senior physician		Х	xx		х					
Nurse		Х	X x		х	xx	х			х
Hospital 5										
Senior physician			Х	xx						
Nurse	-	-	-	-	-	-	-	-	-	-