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Title: If ER Nurses Crash, Will Patients Follow? By: Duke, Paul, Newsweek, 00289604, 2/2/2004, Vol. 143, Issue 5

Database: MasterFILE Premier

If ER Nurses Crash, Will Patients Follow?

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Section:

My Turn

I'm so overworked that I go home at night praying I haven't made a mistake that might hurt someone

I was sprinting down the hall when a patient waiting to be seen by a doctor asked me for a blanket. She was in her mid-70s, cold, scared and without any family or friends nearby. Did I have time to get her that blanket, or even stop to say a few words to let her know she wasn't alone? No, I didn't.

As an emergency-room nurse, I'm constantly forced to shuffle the needs of the sick and injured. At that particular moment, half of my 12 **patients** were screaming for pain medication, most of the others needed to be rushed off to tests and one was desperately trying not to die on me.

Was that blanket important in the grand scheme of things? Not really. She wasn't going to die without it. So it got tossed on the back burner, along with my compassion.

I often find myself hopping from task to task just to keep everyone alive. By the end of the shift I often wonder, did I kill anyone today? I go home tired and beaten down, praying like mad that I didn't make any mistakes that hurt anyone.

For five years I have worked in one of the busiest emergency rooms in southeastern Michigan. For the last two I have picked up overtime by working in four other hospitals, including the

busiest emergency room in inner-city Detroit. No matter where I am, I experience the same problem--too many **patients**, not enough staff.

When I started emergency-room nursing five years ago, I would typically have four or five **patients**. I could spend a few minutes chatting with them and answering their questions. Let's face it, when you are in a drafty emergency room in just a flimsy paper gown and your underwear, it is nice to have someone actually talk to you. It's a scary experience to get poked and prodded in various parts of your anatomy.

But now on an average day I have 10 to 12 **patients**. Once I even had 22. On that night I was feeling swamped, so I went to the charge nurse for help. She was as busy as I was, so she told me to take the five sickest **patients** and keep them alive, and get to the rest when I could. Now, here's a question: do you want to be one of the five sickest who get attention right away, or one of the others who have to wait maybe seven, eight or even 10 hours before someone gets to you?

That night I staggered home grateful that nobody had died. But I wondered, do I really want to do this job? I love the emergency room, but I was so damn frustrated. Was it just me?

I did an informal survey of the emergency rooms where I work. Every nurse I spoke to said the patient load had at least doubled in the last three years. None of them expected the situation to get better soon.

Troubling, but hardly scientific, so I did a little digging for some real statistics. According to the Centers for Disease Control and Prevention, from 1997 through 2000 the annual number of emergency-room visits went from 95 million to 108 million, while the number of ERs decreased. So who picked up the slack? The staff at emergency rooms, like mine, that are still standing.

The journal Nursing 2003 reports that approximately three out of 10 R.N.s believe their hospital has enough **nurses** to provide excellent care. Not exactly what you want to hear from the people responsible for your loved ones' health.

The future doesn't look any brighter. Studies show that by 2010, 40 percent of all registered **nurses will** be over 50. That's when most of us are getting ready to cut back our hours or switch from direct patient care to chart review. By 2020 there **will** be an estimated shortfall of 808,400 **nurses**, partly because many **will** have retired or become so dissatisfied that they've quit, but also because fewer people are entering the profession. Yet the number of Americans older than 65 is expected to double from 35 million to 70 million over the next two decades. As someone who knows just how often the elderly visit ERs due to heart attacks, strokes and falls, I see trouble ahead.

Don't get me wrong--my colleagues are some of the hardest-working and most professional

nurses you **will** find. But when you're given 20 **patients** when you should have six, well, you're only so good.

After all this you must wonder why I don't quit. The truth is, I love nursing. It's what I am good at. I love the challenge of not knowing what **will** come crashing through the doors. Emergency-room **nurses** rise to the occasion. But we are being steamrolled, stretched thin and beaten down, and the best of us are frustrated.

At the end of my 18-hour shift I got that little old lady her blanket and spent a few minutes talking to her. She took my hand, smiled and said thank you.

I'm frustrated, but I'll be back.

PHOTO (COLOR): LIFE OR DEATH: The charge nurse told me to keep the five sickest **patients** alive, and get to the rest when I could

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By Paul Duke, Duke lives in Southgate, Mich.

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