

EMERGENCY NURSE

How to triage a patient?

1.You will find the patients' name on Launchpoint and right click in their row to open the context menu. Select 'eCTAS' from the context menu.

2. You are brought to the eCTAS mpage, where you will select 'Open triage Assessment' to open your triage form.

3.Leave the 'Acuity' section blank for now. You will begin your triage under the 'ED Triage' section.

4.You will fill in your triage form with all the applicable information. All fields listed in yellow or with an asterisk are mandatory and have to be filled out in order to continue(Allergies, Falls Risk Assessment, Mental Health Assessment, Pain Assessment, Infection Control Screening)

- In order to document Allergies, as an example, you will select the 'Document assessment' radio button under the Allergies/Home Medications heading. An additional form/window will open with the documentation required. This is the same for any section that has the 'Document Assessment' button.
- To save those forms and return to the main triage form, you will click on the "return" icon which is the blue half circle in the top left corner of the form.
- You will get conditional logic boxes that will populate based off of prior answers. To document in those sections, you will select the appropriate radio button to open that additional form. And then save the form
- as listed above.

5. Once you have completed your triage form, you will sign the form via the green checkmark in the top left-hand side.*Remember to leave the Acuity section blank still.

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A window will pop up asking if you want to 'sign' your document, select the 'Sign' button.

6. You will be brought to the 'eCTASComponent'. You will type in your CEDIScomplaint or search from the list provided.Once you type in or click on your CEDIScomplaint, the list or modifiers will populate.

7. Click on 'Calculate CTAS score'. Score will be shown with a dropdown menu. If you wish to change the score, you can do so by using the dropdown menu, however it will ask you for an override reason.

Override Reason:	Select One	~	
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TAS Mpage	\times	+		
	¥	eCTAS Compone	nt	
eCTAS Component		Onen Tringe Assessme	-	
Triage Form (0)		CEDIS Complaint:	m	
Open Triage	Assessme	ent		
CEDIS Comp	laint: G	eneral Weakness		
CEDIS Modif	iers			Calculate CTAS Score >
🗌 Severe Re	spiratory	/ Distress	Shock	
🗌 Unconscio	us (GCS	3-9)	Severe Dehydra	ation (General Weakn
🗌 Moderate	Respirat	ory Distress	Hemodynamic	Compromise
Altered Le	evel of Co	onsciousness (GCS	🗌 Fever, Immuno	compromised
🗌 Looks Sep	tic (3 SI	RS Criteria)	Moderate Dehy	dration (General Wea
Mild Respi	iratory D	istress	Pulse Rate / Pr	essure Abnormal (He
Fever (Lo	oks Unwe	ell), < 3 SIRS Crite	Acute Inability	to Ambulate
Mild Dehy	dration (General Weakness)	Frailty Modifier	
Fever (Ap	pears We	ell), 1 SIRS Criterio	Potential for De	hydration (General W
Chronic W	/eakness		0	

8. Once you are happy with the score, you will click on 'Submit Score'.

9.You are brought back to the triage form. You will confirm that the eCTAS score populated. You will reenter the CEDIS complaint in the drop down.

	Acuity				
1	Triage Interventions	Patient/Family advised to notify RN if change in condition			
	O Open triage intervention documentation	O Yes O No	5		
	Did eCTAS score populate?	eCTAS Level Score (only change if Automated CTAS Score is not present after initial signing of form)			
	O Yes O No	○ Pending ○ 4 ○ 1 ○ 5			
ł	CEDIS Complaint	0 2			
	×				

eral Weakn

ulate CTAS Score > eCTAs Score

Submit Score

10. You will sign the triage form by clicking on the green checkmark in the top lefthand corner of the form. The triage form closes and you are returned to the eCTAS mpage. It will look similar to this below. *Note that it states, no more action needed. The score is listed as well as the CEDIS complaint.

eCTAS Mpage	×	+			
	¥	eCTAS Component			
eCTAS Component Triage Form (0)	No more action needed				
CEDIS Complaint: General Weakness Submitted Modifiers: Pulse Rate / Pressure Abnormal (Hemod Fever (Appears Well), 1 SIRS Criterion (CEDIS Complaint: General Weakness Calculated Score: 3 Override Reason: Submitted Modifiers: Pulse Rate / Pressure Abnormal (Hemodynamically Stable) Fever (Appears Well), 1 SIRS Criterion (Fever)			

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If you return to LaunchPoint, you will notice 3 things in the patients' row:

- CTAS score listed to the left of the patient's name.
- The CEDIS complaint listed in the patient details column (shown with arrow)
- The patient's status will not say 'Triage Complete'

Γ,	CROIX, LA	General weakness		Triage Complete
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TRIAGE RE-ASSESSMENT

If you bring a patient in to reassess them as the triage nurse, you will document this in an 'Adhoc' form. To get to this form, follow the steps below:

• Highlight the patient's name on LauncPoint, and click on 'Adhoc' in the top toolbar.

it 🟢 Calcula or 🎬 AdHoc IIIIIII ledication Administration 🎼 Specimen Collection 🚨 PM Conversa

- From the list of Adhoc forms, select the form 'ED Triage Reassessment' and select the 'Chart' button.
- Document as applicable in this form, and sign the form via the green checkmark in the top left side of the form.



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ADDITIONAL TRIAGE INFORMATION

• Any interventions the triage nurse completes will be listed under the Triage Interventions section, which can be found under 'Acuity'. Once you select this radio button, you will get a list of options. Select from the



list of options and return to the main triage form by clicking on the return button in the top left corner (blue half circle with arrow).

 Under the 'Mode of Arrival' heading, if you click off the 'EMS' radio button, you will get a second form/window that populates. This is to document any pre-arrival interventions as well as the 'patient story' from EMS.

Pre-arrival Interventions							
EMS Chief Complaint	1						
Airway	Assisted ventilation BVM Endotracheal intubation	Laryngeal mask airway	☐ Oral airway ☐ Nasal airway				



• In order to document Temperature and Pulse, you must select method of delivery for those prior to documenting that vital. Once those are selected, the dithered-out documentation box becomes available for documentation.

Temp Source	Oral Temp:	Axillary Temp:	Tymp. Temp:	Rectal Temp:	Pulse Method	Pulse:
~	Deg C	Deg C	Deg C	Deg C	~	bpm







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