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Correspondence

Description of non-urgent patients in the emergency department



The emergency department (ED) overcrowding is a major public health problem worldwide. One of the important reasons for this is the frequent use of ED by non-urgent patients (1). Crowded EDs negatively impacts the quality of patient care and the satisfaction of patients and staff of the ED (1). For this reason, many studies have been carried out to investigate the characteristics of these patients and the reasons for their choosing the ED.

It is important how the "non-urgent patients" are described in the studies. Worldwide accepted criteria for this situation have not yet been established. This important issue should be taken into account when planning studies on this subject.

There are some differences on identifying patients among related studies as non-urgent. Patients are usually categorized by a nurse (88%) or a physician, in the triage unit (2). In this phase complaints, vital signs, and waiting times are taken into account (2). In general, patients who do not need urgent intervention and can be treated in primary care units are described as non-urgent (2).

Triage levels are helpful in categorizing patients as non-urgent. No special triage category has been identified for non-urgent patients. However, they are often included in the lowest level of urgency (3). It is not difficult to distinguish these patients from urgent patients in crowded EDs where non-urgent patients are treated in an additional unit, known as "fast-track".

In the triage system used in Turkey, patients are grouped as green, yellow or red starting from the lowest level of urgency. Then, the patients in the yellow and red categories are divided into two subgroups according to their urgency ratings (4). The green (Level 5) category includes patients who are not urgent and can be examined at primary care units or outpatient clinics. This five-level triage system is derived from the Canadian Emergency Department Triage and Acuity Scale (CTAS).

It remains uncertain which of the ED patients should be considered as "non-urgent". At this point, it is necessary to determine the objective criteria that can guide. For this purpose extensive literature reviews, additional studies and expert opinions are needed.

Conflicts of interest

The authors declare that there is no conflict of interest.

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