

SUNDHEDSSTYRELSENS "AKUT RAPPORT" I 2007

STØRSTE ORGANISATORISKE ÆNDRING I NYERE TID

DESIGN-EM ET TVÆR DISCIPLINÆRT
FORSKNINGSNETVÆRK

MISSION

AT UDFORSKE VIRKNINGERNE AF DENNE ÆNDRING

VISION

BIDRAGE MED NY EVIDENS TIL BESLUTNINGSTAGERNE





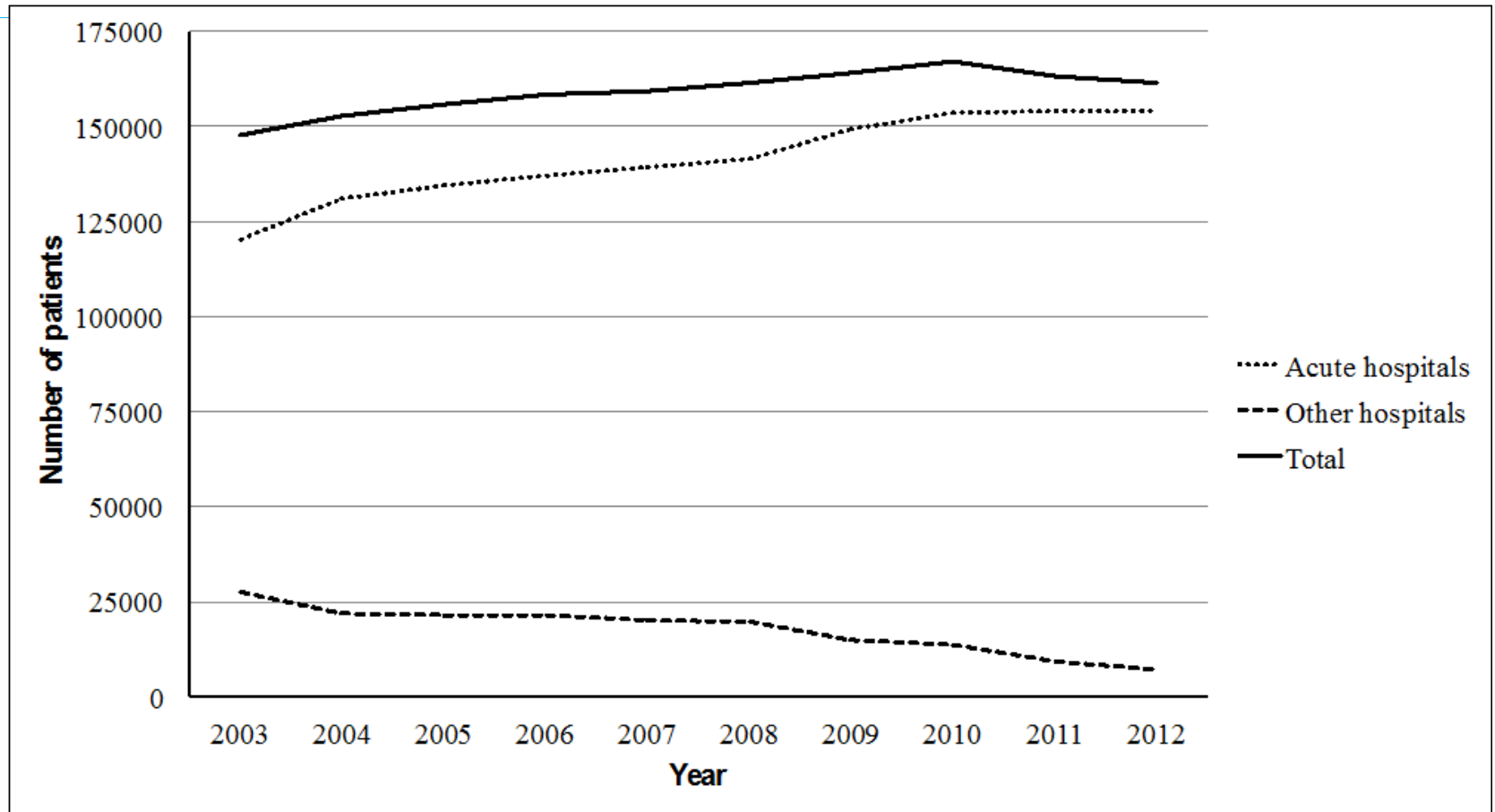
UDFORDRINGER I AKUTMODTAGELSEN

HANS KIRKEGAARD
PROFESSOR I AKUTMEDICIN, OVERLÆGE, DR. MED.



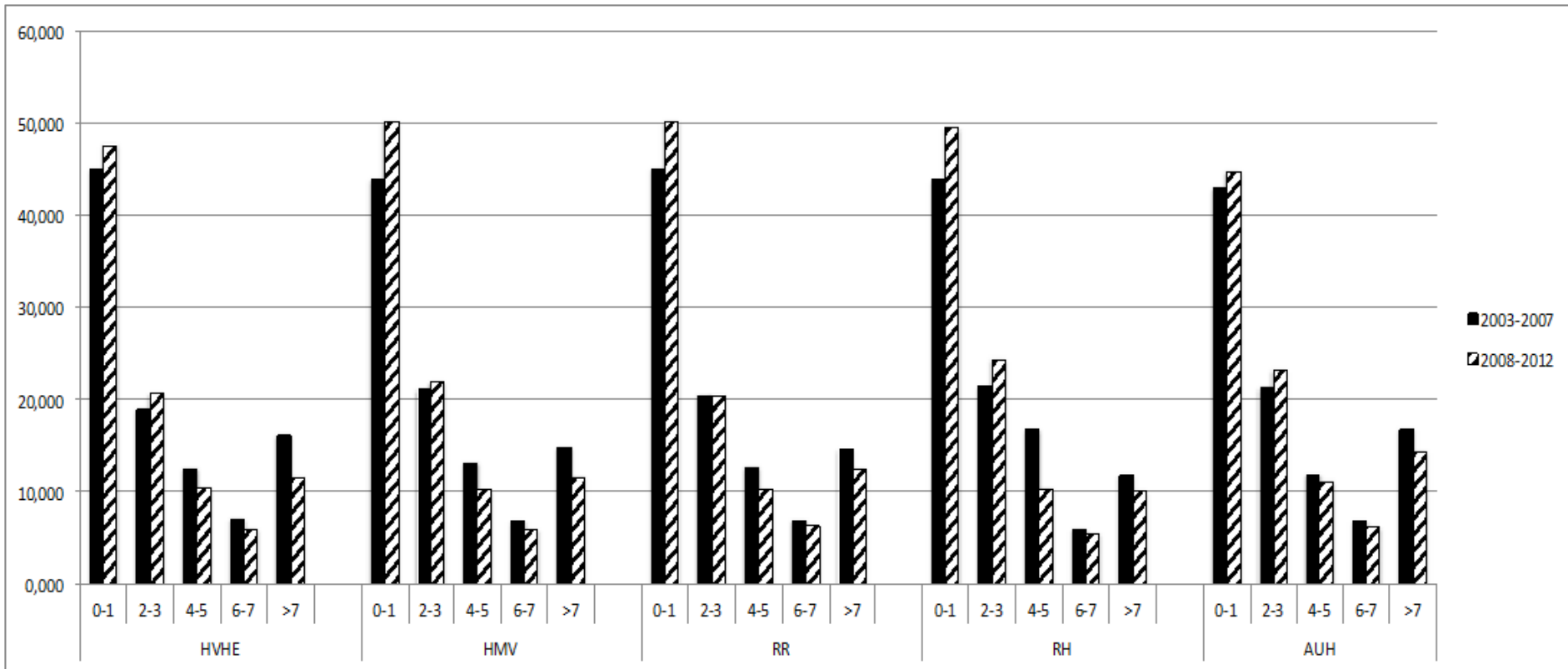


AKUTTE INDLÆGGELSER I REGION MIDT 2003-12





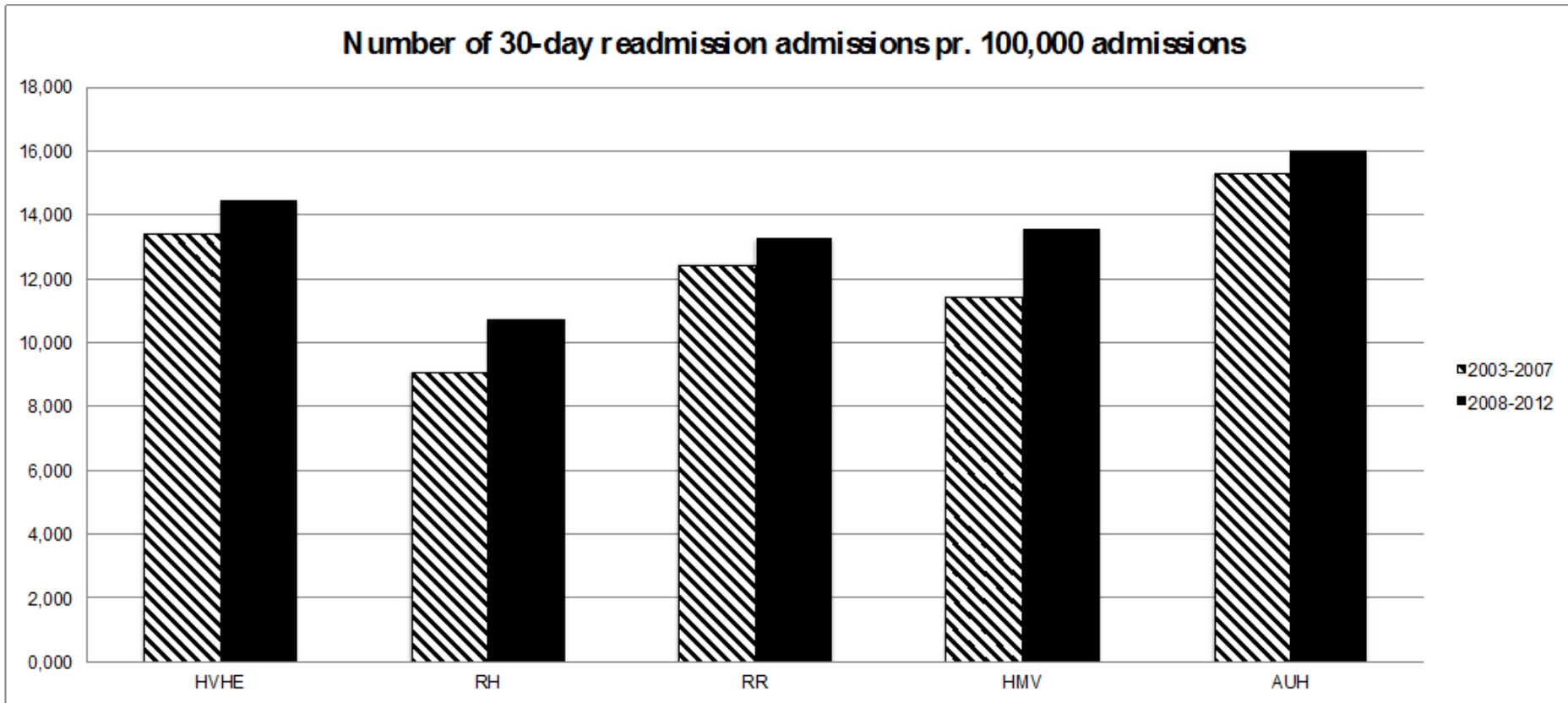
LENGTH OF STAY





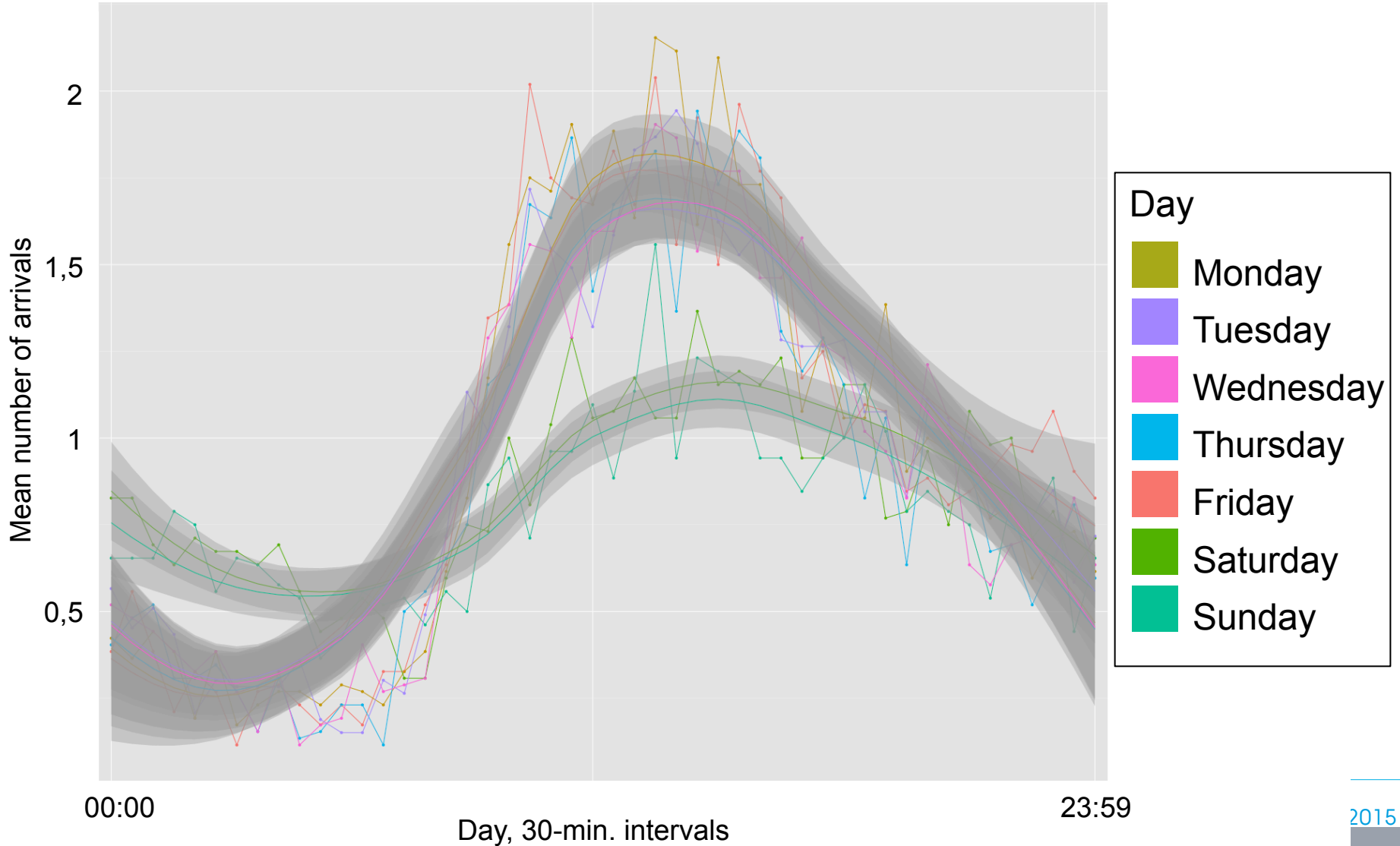
READMISSIONS

Number of 30-day readmission admissions pr. 100,000 admissions

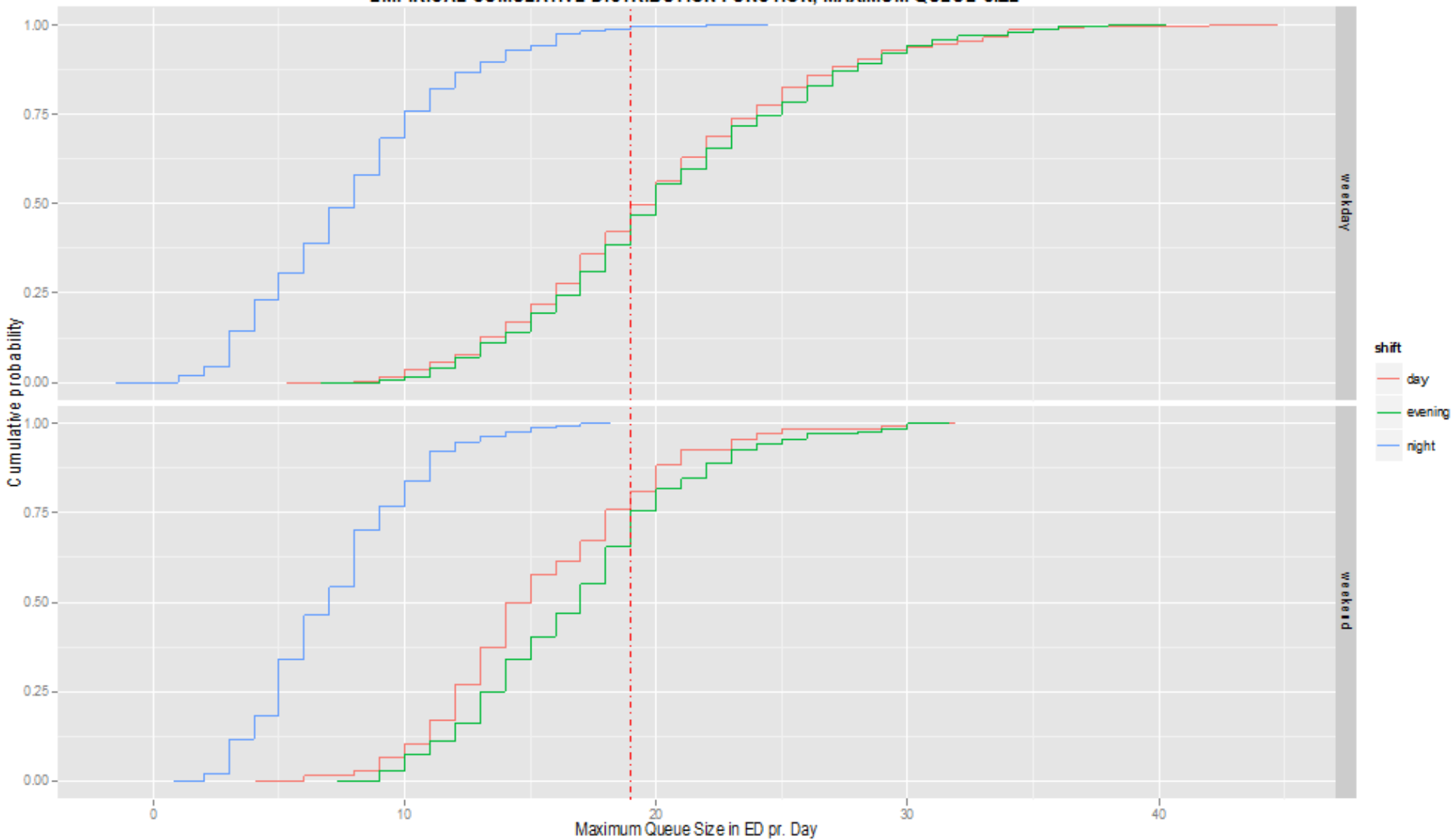




DØGNVARIATION, HVALEN OG RØDSPÆTTEN

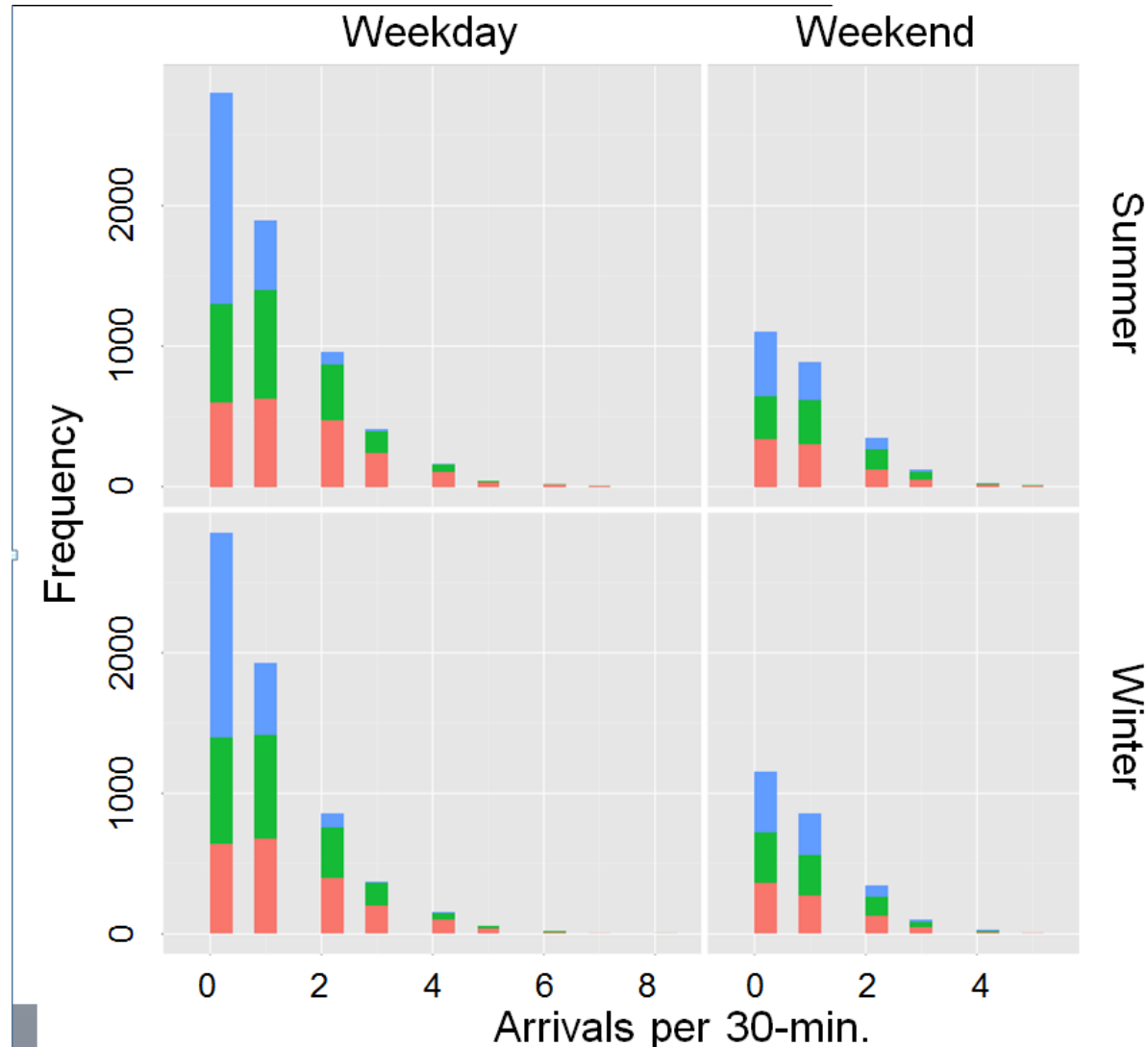


EMPIRICAL CUMULATIVE DISTRIBUTION FUNCTION, MAXIMUM QUEUE SIZE



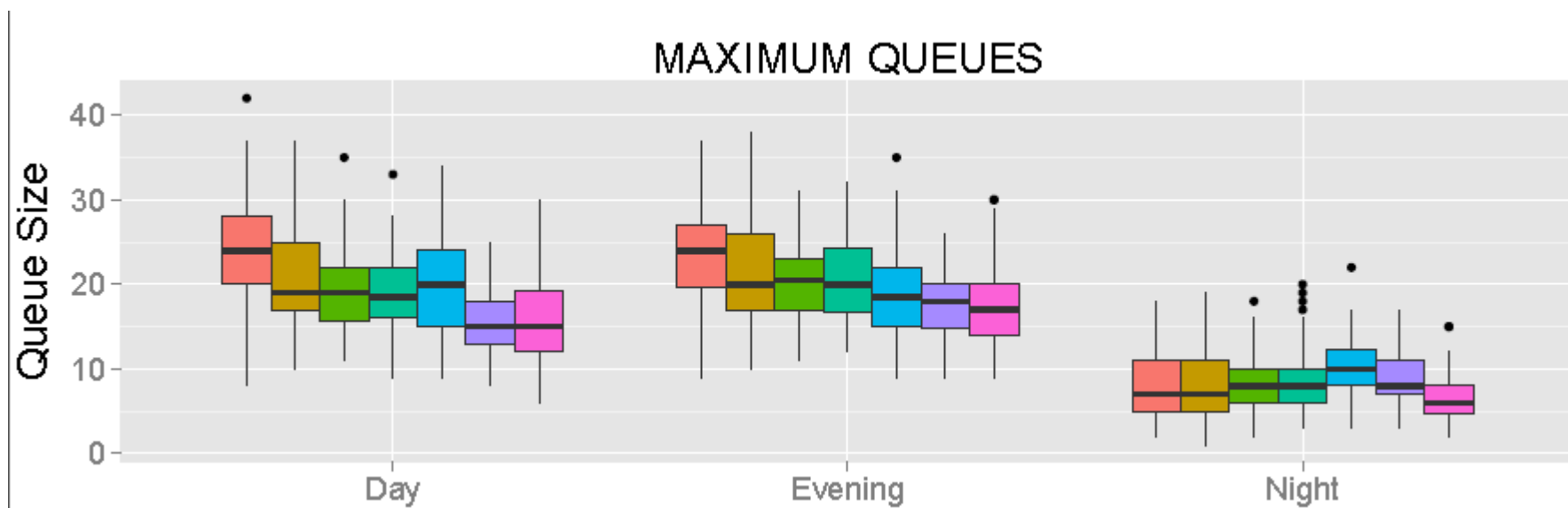


ANKOMST VARIATION





MAXIMUM QUEUES



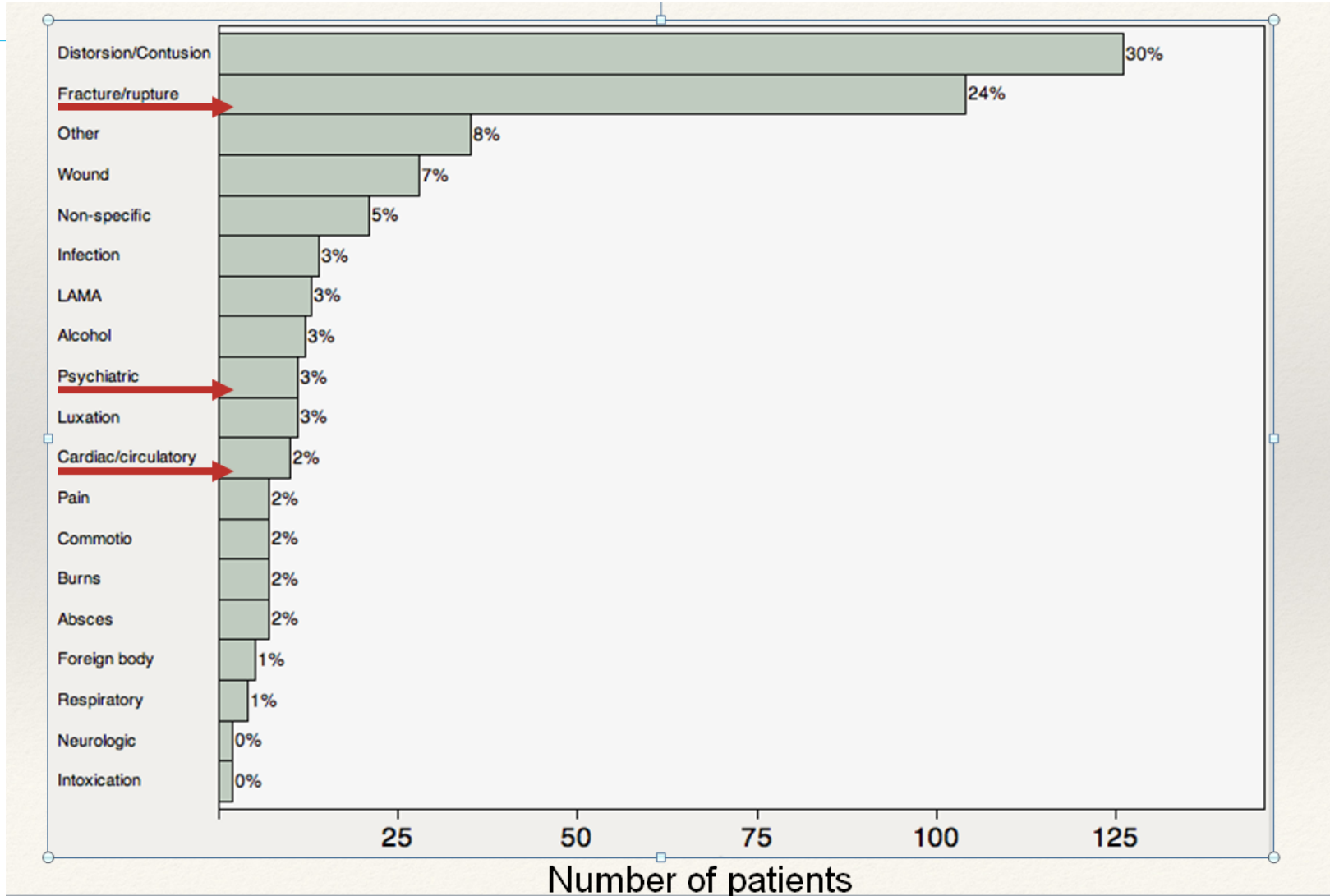


LEFT AGAINST MEDICAL ADVICE

	ED-discharge n = 273.560	LAMA n = 2.675
Sex: male	53 %	63 %
Age	31 [16;54]	28 [18;46]
72h mortality	0,04 %	0 %
72h reattendance	6 %	16 %



GEN-HENDVENDELSE





UDFORDRINGER I AKUTMODTAGELSEN

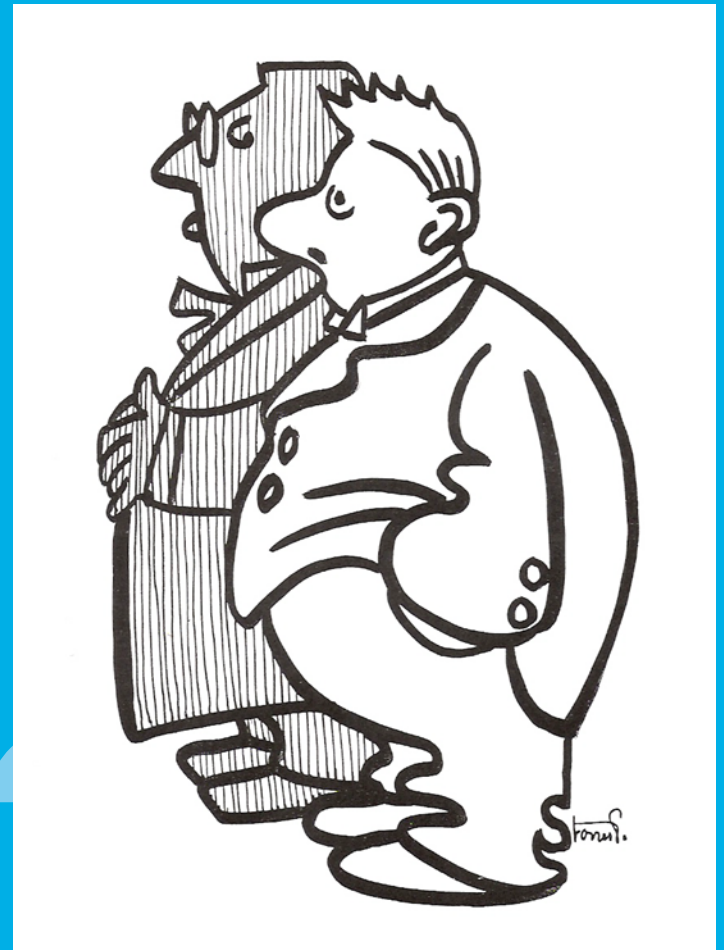
- › Forskellige hastegrader (triage)
 - › Forskellige ressourceallokeringer
 - › Variation over døgn, uge, og år.
 - › Mange discipliner og specialer
 - › Mange symptomer (diagnoser)
 - › Mange overenskomster
 - › Stramme økonomiske rammer
 - › Stor bevågenhed, lille margin for fejlskøn
-
- › DET HELE ER UNDER OMORGANISERING



DET AKUTMEDICINSKE PARADOKS

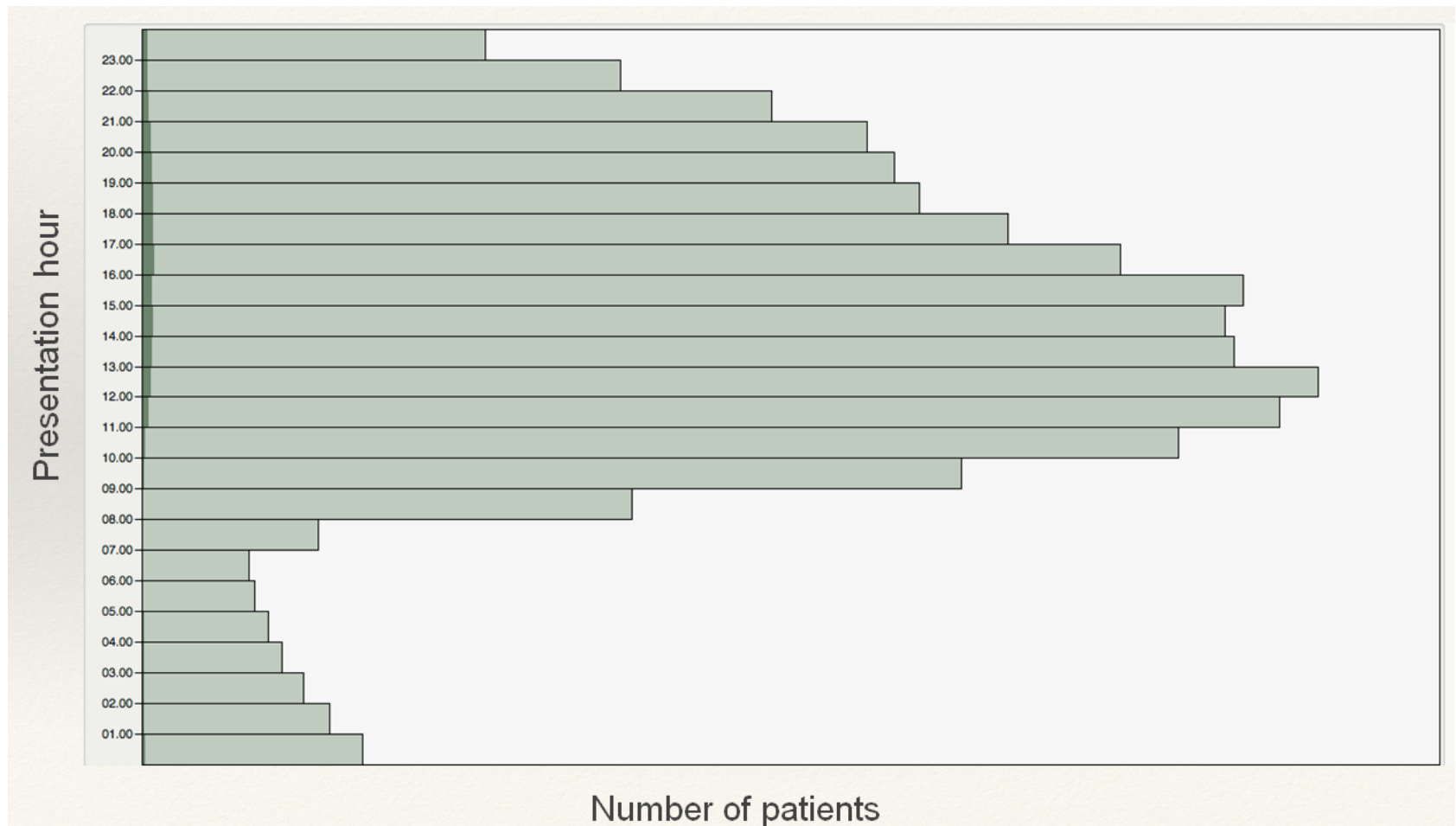
Endokrinologen: Man skal tænke sig om før man handler!

Akutmedicineren: Ja, jeg har prøvet det, men så var det allerede for sent.





RELATION TIL CROWDING





DØGNVARIATION

