Emergency Department Nurses’ Triage and Prioritization Decisions in Patients Experiencing Acute Coronary Syndrome Symptoms: An Integrative Review

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Emergency Department Nurses’ Triage and Prioritization Decisions in Patients Experiencing Acute Coronary Syndrome Symptoms: An Integrative Review

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RESEARCH QUESTION
How do emergency department (ED) nurses make triage decisions and/or prioritize care for patients that are experiencing symptoms consistent with acute coronary syndrome?

BACKGROUND
- Acute Coronary Syndrome (ACS): 1) Unstable angina, 2) Non-ST-elevation myocardial infarction (MI), or 3) ST-elevation MI
- Every 40 seconds in U.S., a person experiences ACS
- Over 200,000 people seek care in ED for MI (Rui & Kang, 2017)

• Early identification of ACS = earlier interventions to reduce morbidity and mortality (Collet et al., 2020)

• Limited information on how nurses identify patients experiencing symptoms consistent with ACS symptoms

METHODS
- Integrative review – guided by Whittemore and Knafl (2005)
- Databases: CINAHL and PubMed
- Inclusion criteria: a) ED nurses b) Patients presenting with ACS symptoms c) Any age d) published 2007 to 2021 e) discussed nurses’ triage and/or prioritization decisions in context of ACS symptoms f) research
- Exclusion criteria: a) Not in English b) non-research articles
- Evaluation: Johns Hopkins Nursing Evidence-based Practice Model (Dearholt & Dang, 2017)

RESULTS – THEMES

<table>
<thead>
<tr>
<th>ARTICLE</th>
<th>LEVEL/QUALITY</th>
<th>SETTING</th>
<th>SAMPLE</th>
<th>STUDY DESIGN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arslanian-Engoren (2009)</td>
<td>Level 3 Quality A</td>
<td>One ED; Midwestern USA</td>
<td>12 ED nurses (11 women, 1 man)</td>
<td>Descriptive Content Analysis Focus group</td>
</tr>
<tr>
<td>Arslanian-Engoren et al. (2011)</td>
<td>Level 3 Quality B</td>
<td>Nationwide sample; USA</td>
<td>158 ED nurses (all members of Emergency Nurses Association)</td>
<td>Descriptive Survey study</td>
</tr>
<tr>
<td>Ryan et al. (2015)</td>
<td>Level 3 Quality B</td>
<td>One ED; Australia</td>
<td>153 ED patients w/ confirmed ACS (94 male, 59 female)</td>
<td>Descriptive Retrospective</td>
</tr>
<tr>
<td>Sanders &amp; DeVon (2016)</td>
<td>Level 3 Quality B</td>
<td>Two EDs; Southeastern USA</td>
<td>283 ED patients with confirmed ACS</td>
<td>Descriptive Retrospective</td>
</tr>
</tbody>
</table>

IMPLICATIONS & CONCLUSIONS
- Little existing generalizable knowledge related to this question
- Additional research necessary: larger, more representative samples
- Limited existing evidence suggests potential targets for educational/practice interventions

REFERENCES
- Dearholt & Dang, 2017

*Full list of references available upon request
†Johns Hopkins Nursing Evidence-based Practice Model Evidence Level and Quality Guide (Dearholt & Dang, 2017) used with permission