



Emergency Department Situation Report

Reporting date: 17-02-2021
Reporting period: 01-01-2019 – 14-02-2021

SUMO is a system that has been developed and implemented at the Robert Koch Institute. It processes and provides health data for surveillance and public health research. The Emergency Department Situation Report presents data from the routine documentation of selected emergency departments in Germany, and shows the current emergency department utilisation.

WEEKLY OVERVIEW

Number of admissions in this week: **11,790**
 Change compared to last week: **+4.1%**
 Change compared to mean in 2019: **-29.1%**

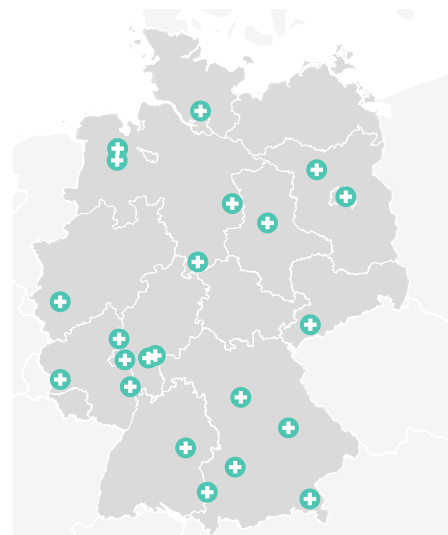
DATA SOURCE

Emergency departments: in total 22 emergency departments in Germany, located in the federal states Baden-Wuerttemberg, Bavaria, Berlin, Brandenburg, Hesse, Lower Saxony, Rhineland-Palatinate, Saxony, Saxony-Anhalt, and Schleswig-Holstein

Emergency department attendances: 40 to 256 attendances per day, per emergency department (mean in 2019)

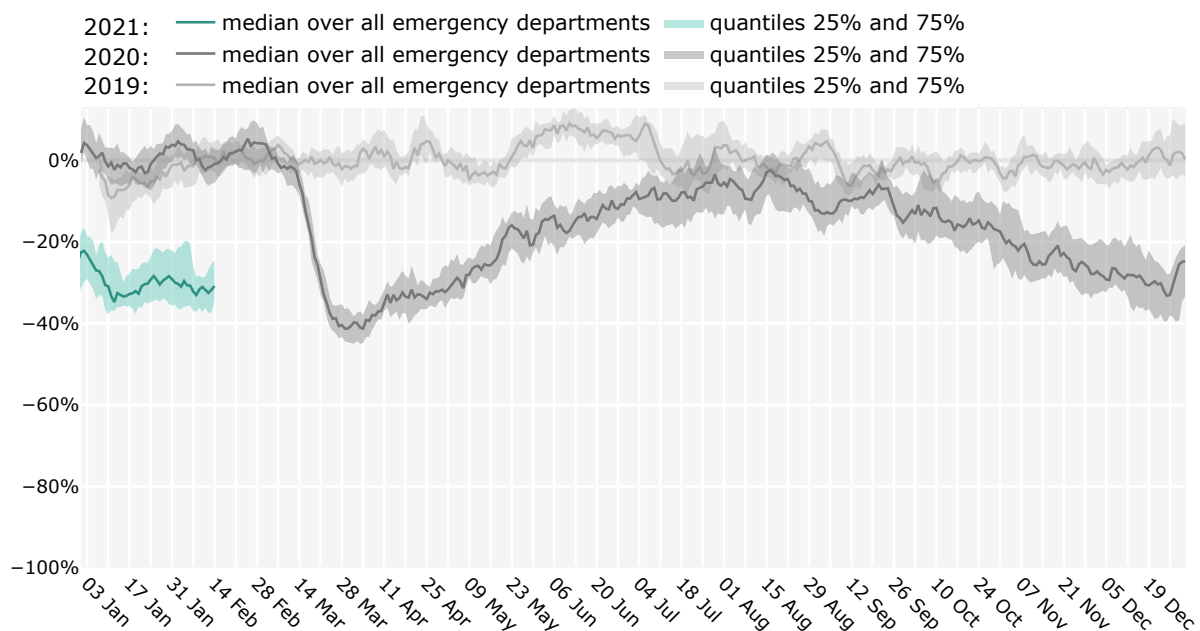
Level of care:

Basic emergency care: 1 departments
 Extended emergency care: 6 departments
 Comprehensive emergency care: 13 departments



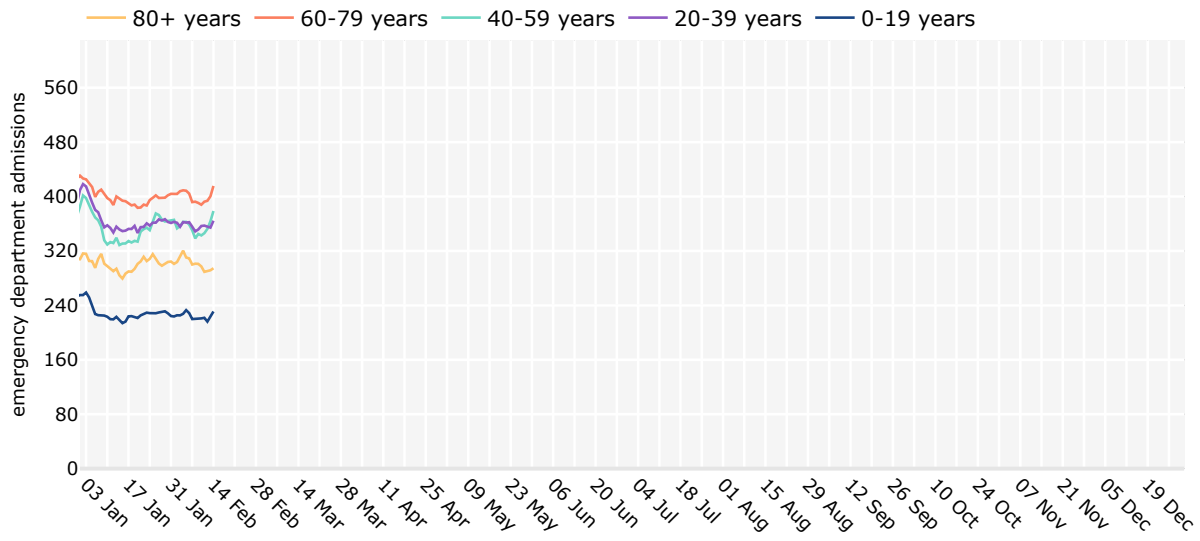
EMERGENCY DEPARTMENT ADMISSIONS

Relative deviation of the number of admissions, compared to the mean in the pre-pandemic year 2019 per emergency department

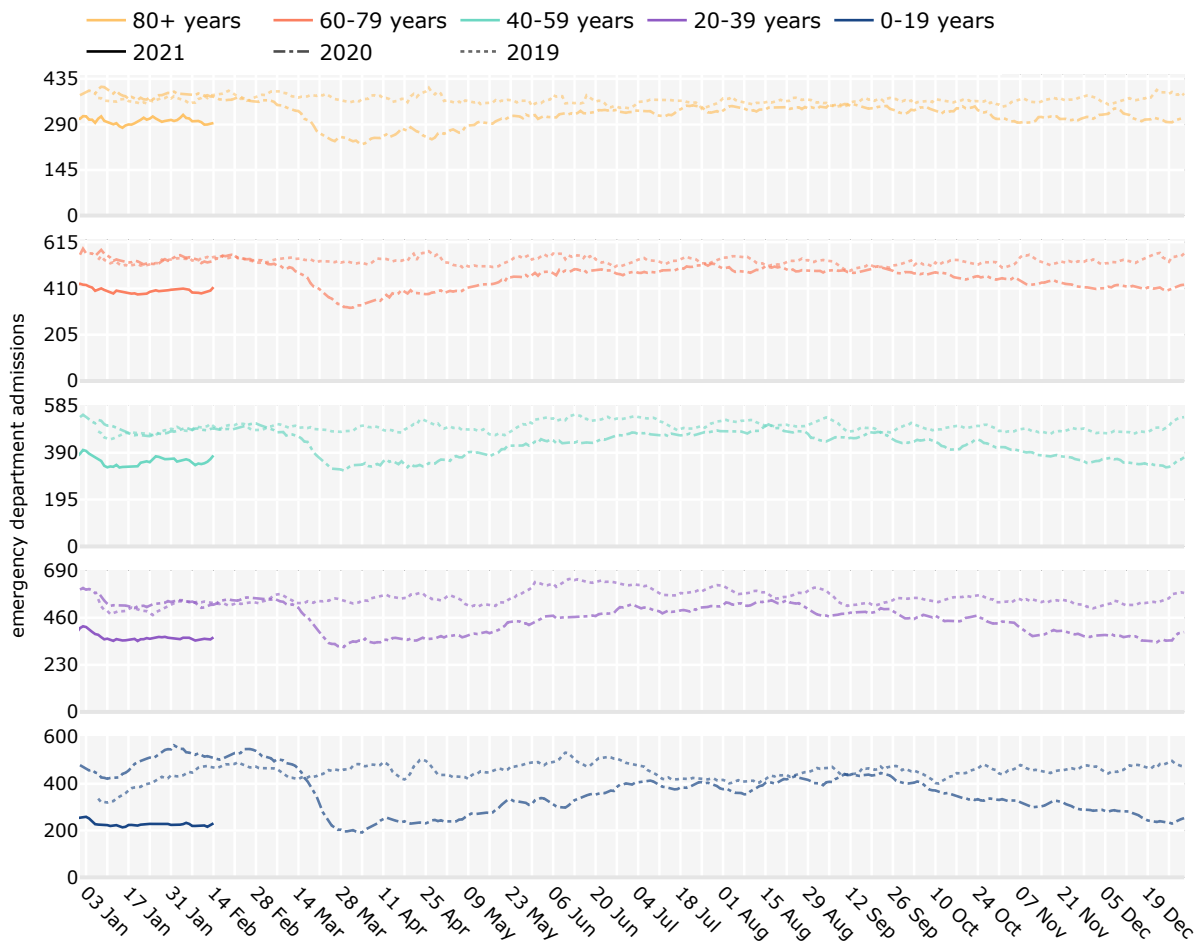


AGE

Overview of all age groups in 2021

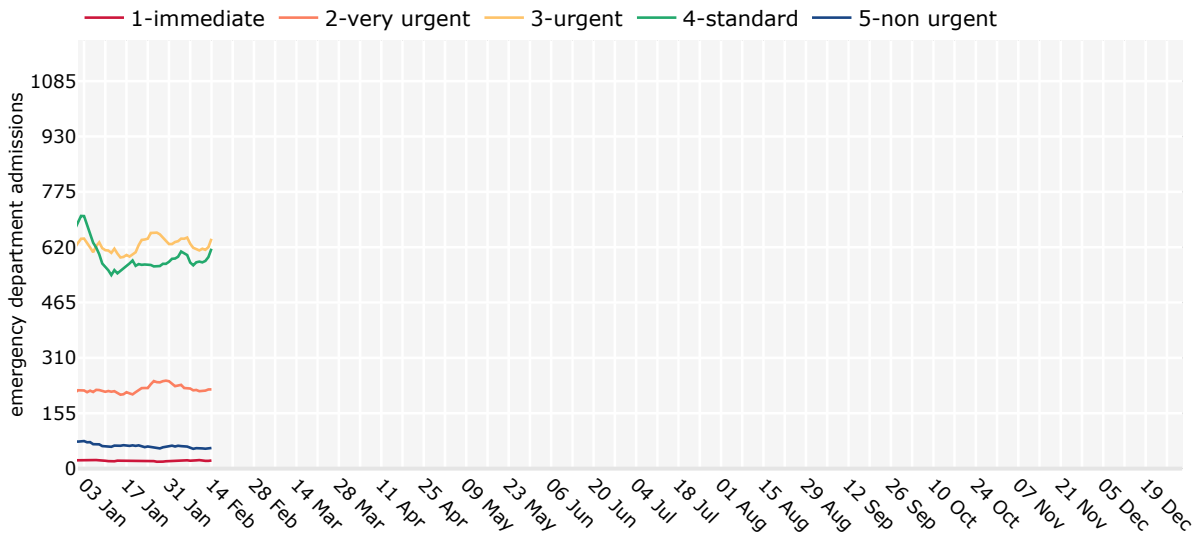


Comparison of all age groups with last years

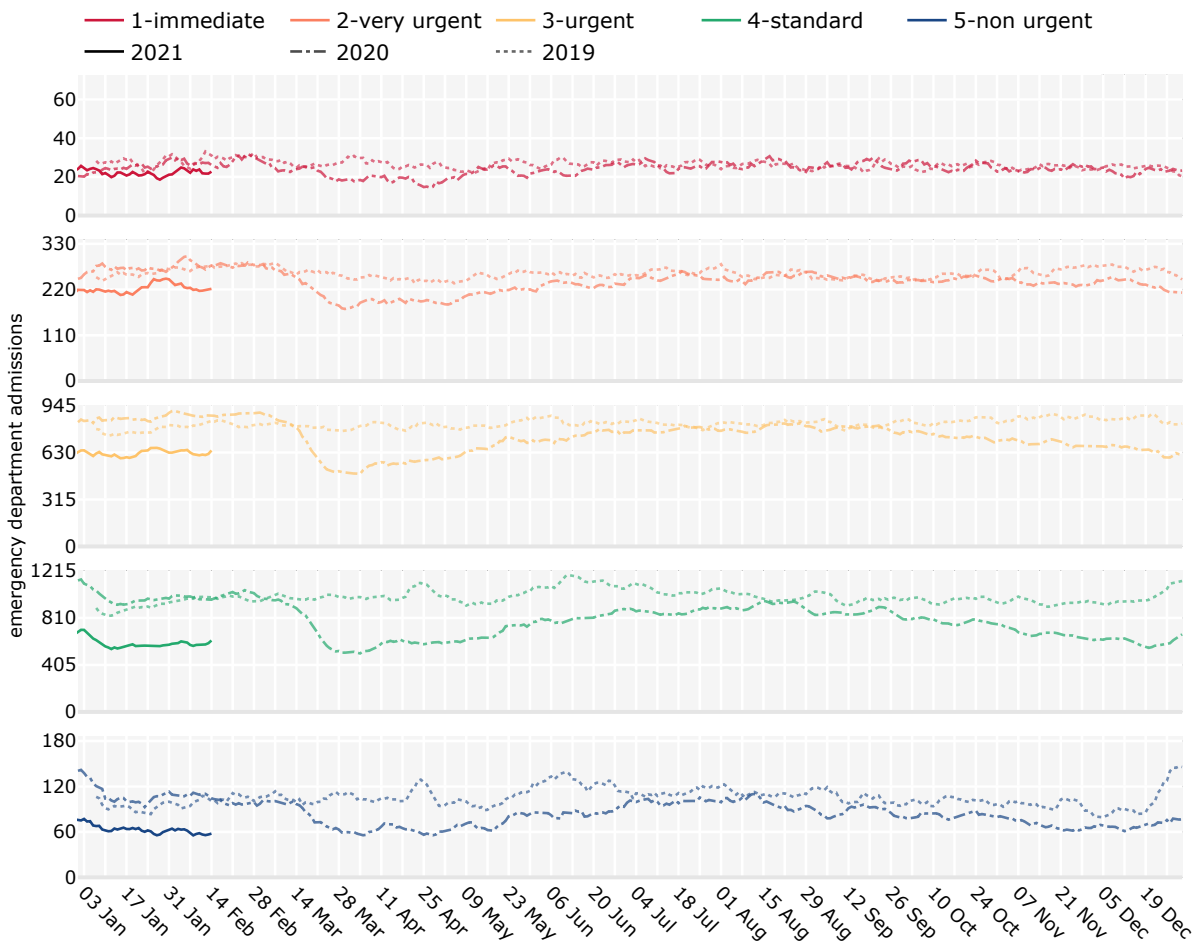


TRIAGE

Overview of all triage levels in 2021



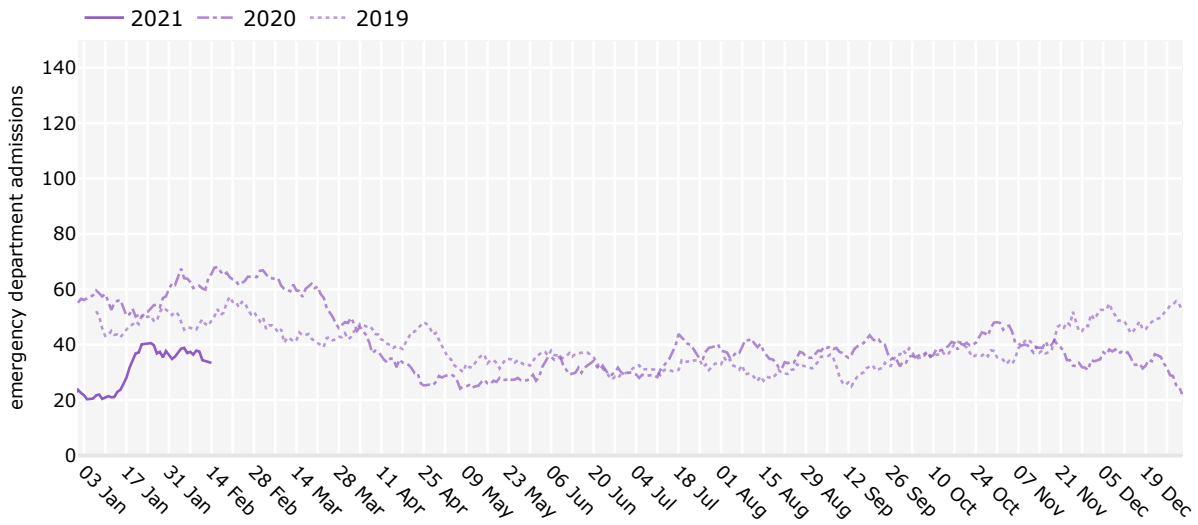
Comparison of all triage levels with last years



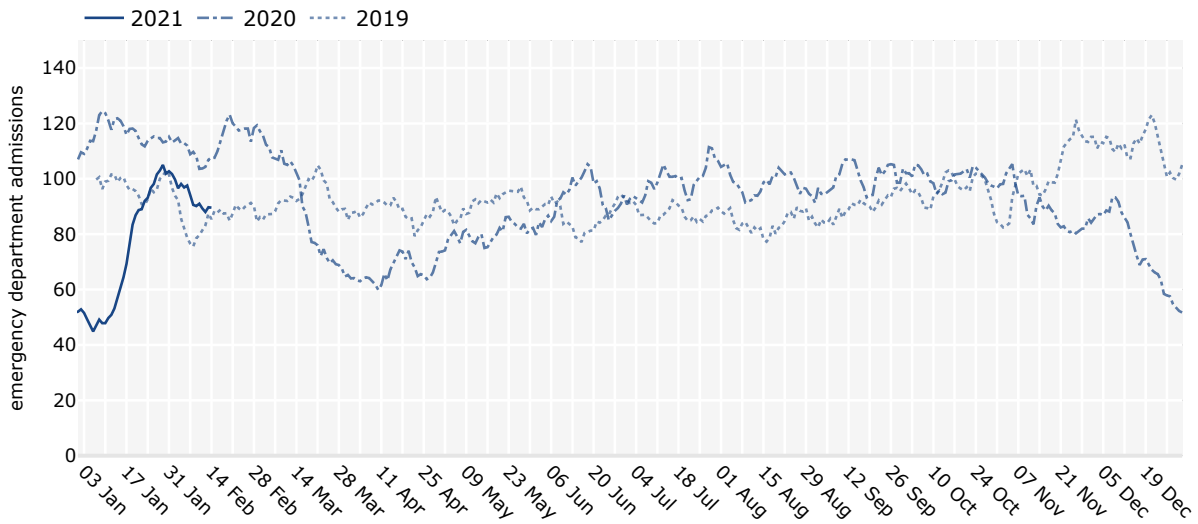
Based on 22 out of 22 emergency departments, triage is available for 91.8% of the admissions and displayed here.

CHIEF COMPLAINT

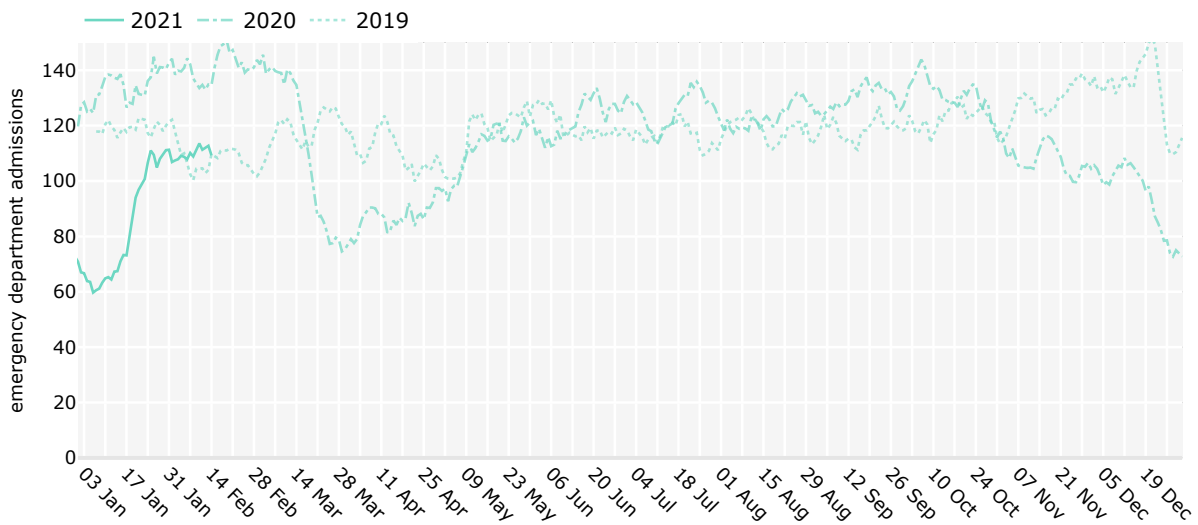
Respiratory chief complaints



Cardiovascular chief complaints



Neurological chief complaints



In 11 out of 22 emergency departments the chief complaint is available for 42.5% of admissions. The selected groups represent 26.8% of the admissions with a chief complaint.

DETAILS

The inclusion of emergency departments is based on voluntary participation. All emergency departments with continuous data transfer within the reporting period (at least one admission per day) are included in this report. Reported figures can therefore vary between reports. All time series show a 7-day moving average (mean of all values on one day and the previous 6 days) in the current and the last years. In the weekly overview and the figure "Emergency department admissions", the comparison to the last year represents the average over the changes in each emergency department compared to its mean in 2019. Because the number of emergency department admissions in 2020 is heavily influenced by the COVID-19 pandemic and associated measures, data from 2021 are compared to the pre-pandemic year of 2019.

The Emergency Severity Index (ESI) or the Manchester Triage System (MTS) were used for triage. The reported chief complaints were coded according to the Canadian Emergency Department Information System – Presenting Complaint List (CEDIS-PCL). The following groups were selected: CV – cardiovascular (CEDIS-PCL codes 001-012), NC – neurological (CEDIS-PCL codes 401-411) and RC – respiratory (CEDIS-PCL codes 651-661).

Changes over time can be caused both by real changes of the emergency department utilisation, as well as several other reasons, such as structural changes in the emergency department. The data should neither be interpreted without prior direct communication with the emergency departments, nor should they form the sole basis for action.

PARTNERSHIP

The report has been established in close cooperation with the AKTIN Emergency Department Data Registry and with the ESEG project partners. We want to especially thank the participating emergency departments for sharing their data.

**CONTACT**

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