



Emergency Department Situation Report

Reporting date: 07-10-2020
Reporting period: 01-11-2019 – 04-10-2020

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

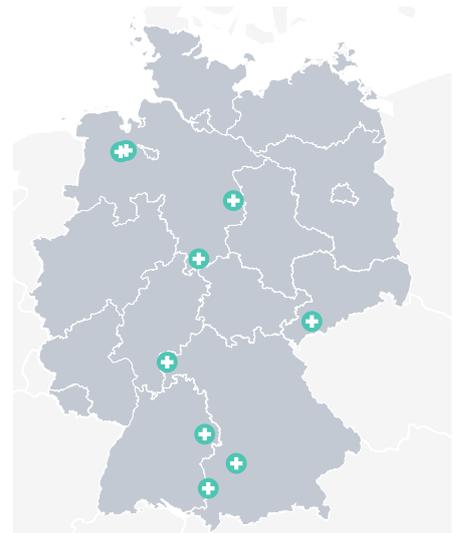
Number of admissions in this week: **5,821**
 Change compared to previous week: **+2.5%**

DATA SOURCE

Emergency departments: in total 9 emergency departments in Germany, located in the federal states Baden-Wuerttemberg, Bavaria, Lower Saxony and Saxony

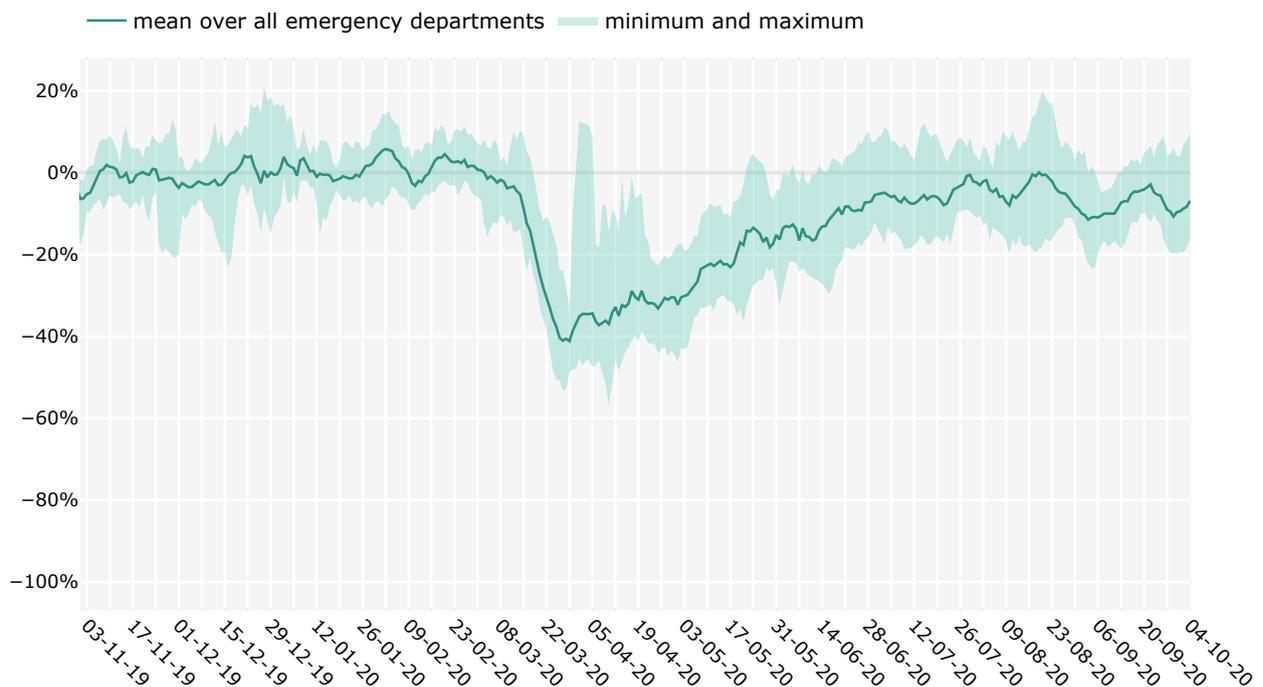
Emergency department attendances: 32 to 256 attendances per day, per emergency department (mean in 2019)

Level of care:
 Extended emergency care: 4 departments
 Comprehensive emergency care: 5 departments

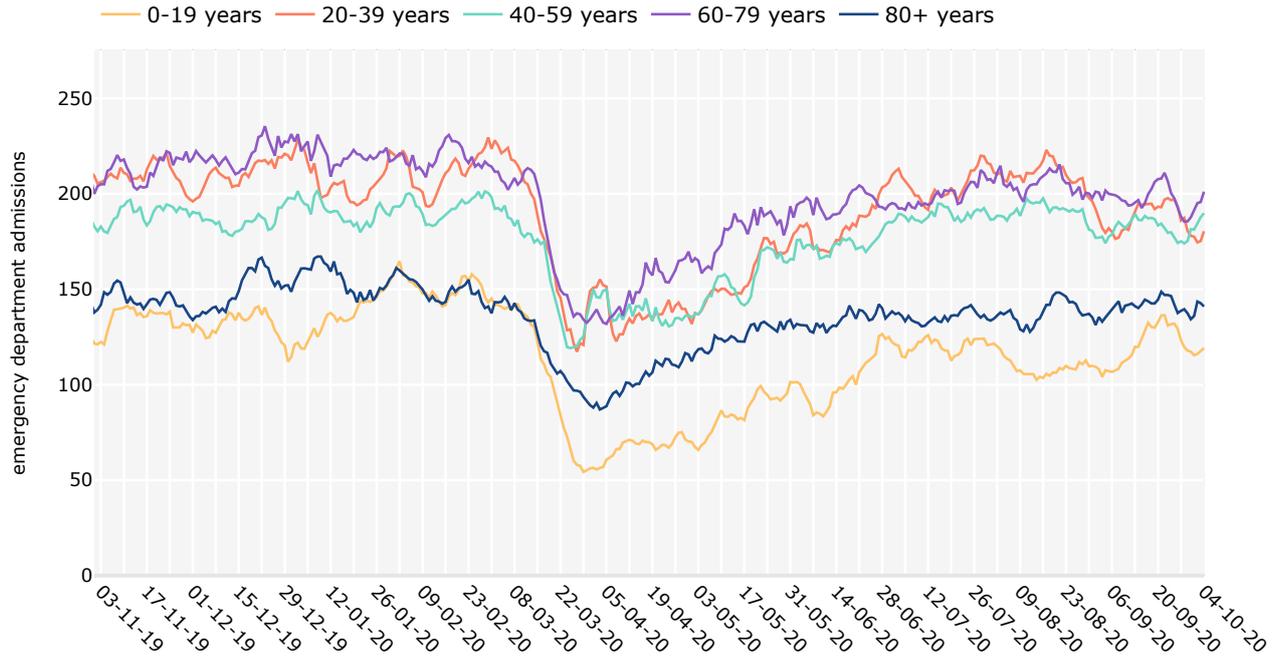


EMERGENCY DEPARTMENT ADMISSIONS

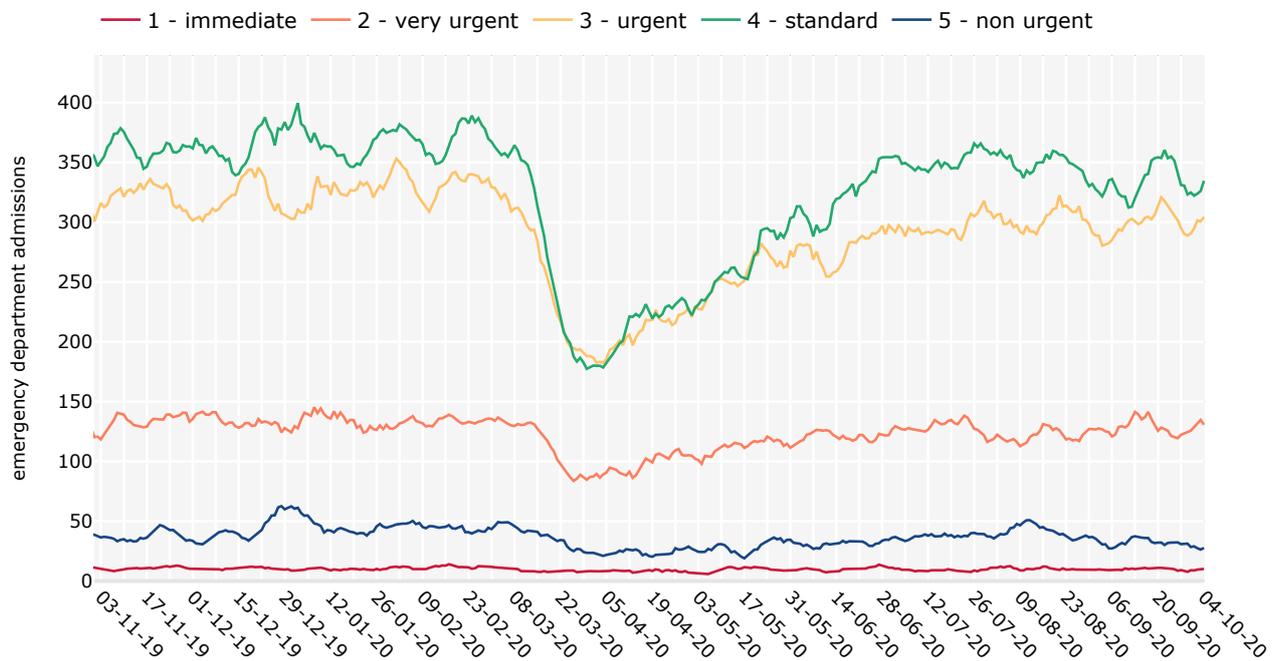
Relative deviation of the number of admissions, compared to the reference period (01-11-2019 – 01-03-2020)



AGE

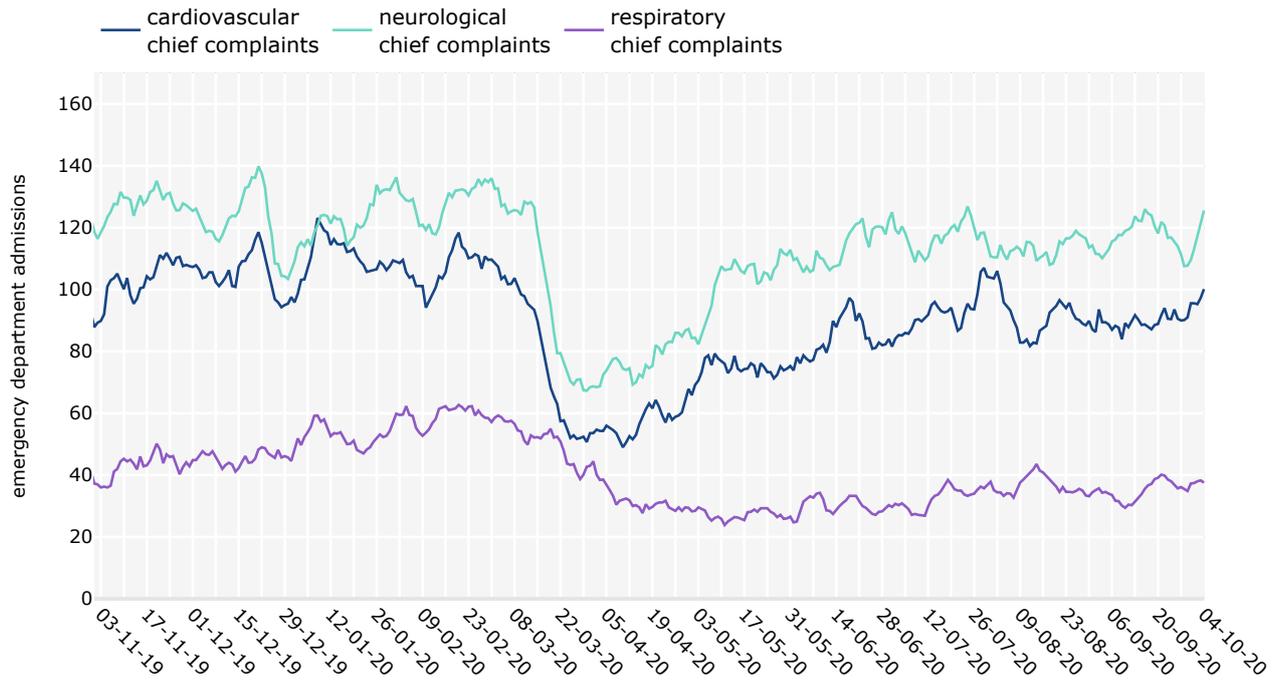


TRIAGE



Based on 9 out of 9 emergency departments, triage is available for 96.3% of the admissions and displayed here.

CHIEF COMPLAINT



In 9 out of 9 emergency departments the chief complaint is available for 99.5% of admissions. The selected groups represent 30.0% 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).

The Emergency Severity Index (ESI) or the Manchester Triage System (MTS) were used for triage. The 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.

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