The Prince Charles Hospital
Early-assessment Medical Unit (EMU)

Early-assessment Medical Unit (EMU) at The Prince Charles Hospital is a modern service and only the 4th of its kind in Queensland.

It is recognised as a model for how such areas should be designed and run. The unit has been developed based on consultation with healthcare professionals from both national and international hospitals.

Feedback from patients and members of the public show that not everyone understands what EMU is or does.

This leaflet aims to put that right. It explains how EMU works, the kind of patients it cares for and introduces you to the EMU team.

We hope you find it helpful.

What is an Early–assessment Medical Unit?

EMU is currently a 10-bed unit (in May 2008 this will increase to 16 beds) designed with the comfort and high quality clinical care of patients as its top priority.

In the unit, our specialist staff assess, plan and initiate the care and treatment of patients with medical conditions. EMU is NOT – as some people think – simply a holding area where we keep patients until a hospital bed is found for them.

Instead, patients in EMU are assessed and undergo initial clinical tests and treatment. As a result of our assessment, patients may either be discharged home or admitted to a specialist medical/rehabilitation or sub-acute unit within the Internal Medicine Program.

Which patients could be referred directly to the EMU

Patients considered suitable for admission directly to EMU are those with acute differentiated medical problems but not requiring acute resuscitation.

Care of older people primary focus:
- Older patients with multiple chronic conditions.
- Age friendly principles and practices will be central to the General Medical Service.

Where the patient is potentially unstable or the referral is made after-hours, it is recommended that the patient be referred to the emergency department.

Those patients normally admitted to subspecialty units at TPCH (e.g. cardiac and thoracic) will continue to be admitted as previously without change to admitting policies.
Who’s in the EMU care team?

The success and reputation of the EMU is due to the expertise of staff and coordinated teamwork. Our EMU team includes: Consultants, Medical Registrars and Residents, Nurses, Occupational Therapist, Social Worker, Dietitian, Speech Pathologist, Psychologist, Physiotherapist and Pharmacists.

Being close to the Emergency Department and to X-ray and other diagnostic services ensures that the EMU care team can deliver high quality, coordinated care. This allows EMU staff to:

- Decide on the best course of action for each patient
- Avoid unnecessary admissions to hospital
- Minimise anxiety for patients and their family and friends.

How long do patients stay in EMU?

Patients don’t routinely stay more than 48 hours in EMU. This is because the area is designed and staffed to ensure that patients are either discharged home or admitted as an inpatient to a specialist hospital unit within 48 hours.

We are able to achieve this because we have rapid access to multi-disciplinary Clinical and Therapeutic teams and to an array of diagnostic scans and tests.

About half of all patients brought to EMU are discharged home after assessment, tests and treatment. In some cases, when patients are well enough to be sent home, we ask them to return for tests as an outpatient.

If the assessment shows that a patient will need more than two days in an acute hospital bed, they are admitted to the appropriate specialist unit as swiftly as possible, usually within two days.

How long each patient stays in EMU depends on their condition and subsequent treatment.

If you need to refer a patient to EMU, please contact the Geriatric Liaison Registrar on telephone (07) 3139 5830.