## **Emergency medicine: A story of comings and goings**

To the Editor,

What inspired me to choose emergency medicine as a specialty was the variety and unexpectedness we encountered at work each day. During this pandemic, it has become even more clear the important role our emergency department (ED) plays.

Since the time of onset of sustained spread of COVID-19 in the city of Porto Alegre, Rio Grande do Sul, Brazil, we have changed our flow in the ED at least five times and have had to communicate any change in this protocol to the large staff to ensure appropriate and effective care.

This is an enormous and challenging task, because as we are a 24 h a day/7 days a week department, we employ tremendous human resources. We have more than 3 multiprofessional leadership teams; we have doctors, nurses, administrators, pharmacists, nutritionists, respiratory therapists, security, and housekeeping, among others. Doctors alone, there are 40.

Today, May 3, 2020, after all the structural changes that we have had over the last month and a half, the ED now has three different entry points through which patients arrive. For ambulance arrival, there is a designated response process that involves contact with the doctor in the ED, who then conveys the arriving patient information to the medical team, and establishes the correct entry door for the patient to arrive. Stable and unstable patients may present, some with suspicion of COVID-19, some without. Here, quick and appropriate decision-making as to which

unit these patients should go to is important. There are also different flow patterns for each elevator going to different units in the hospital and these flow patterns involve doctors, nurses, administrators, security, and housekeeping. We know that communication is one of the main failures in disaster response. With all of these individuals and processes involved, changing rapidly on an almost daily basis, the chance of error is high.

During this pandemic caused by a virus that still does not have its characteristics fully understood, the fear and anxiety inherent to this uncertainty increases our chances of error. Besides this, we experience the feeling of being possible sources of transmission of COVID-19 to our families and many of us have decided to distance ourselves from them at the exact moment when we most need their embrace.

During this pandemic, every day, the ED providers leave the certainty of their homes to live in the uncertainty of the frontline. However, our victories are much more in number than our defeats. The pride I feel to be a part of this team increases every day, with each fear and obstacle that we face.

## Acknowledgments

Thanks to all the members of the Emergency Team from Hospital de Clínicas de Porto Alegre.

Financial support and sponsorship Nil.

## Conflicts of interest

There are no conflicts of interest.

Silvana Teixeira Dal Ponte<sup>1</sup>

<sup>1</sup>Department of Emergency, Hospital de Clínicas de Porto Alegre, Porto Alegre, Brazil

## Address for correspondence:

Dr. Silvana Teixeira Dal Ponte, Department of Emergency, Hospital de Clínicas de Porto Alegre, Ramiro Barcelos Street, 2350, Porto Alegre, Brazil. E-mail: sildalponte@gmail.com This is an open access article distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms.

Access this article online	
Quick Response Code:	Website:
	www.ijam-web.org
	DOI: 10.4103/IJAM.IJAM_64_20

**How to cite this article:** Dal Ponte ST. Emergency medicine: A story of comings and goings. Int J Acad Med 2020;6:161-2.

 Submission: 22-05-2020,
 Revision: 22-05-2020,

 Acceptance: 05-06-2020,
 Published: 29-06-2020.

© 2020 International Journal of Academic Medicine | Published by Wolters Kluwer - Medknow