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Nursing in emergency medicine (Philippines Set up)

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The setup of emergency medicine may vary greatly in first world countries in contrast to developing countries such as the Philippines. In my experience as a general nurse in a primary hospital in my home country, I could say that doctors, nurses and the whole health care team make the most out of the limited resources that we have. The primary hospital I've been working in caters to over 3,000 company employees, their dependents, and the residents of the outlying communities. Due the large population of people the hospital covers, nurses are trained to have a keen clinical eye and triage the patients as soon as they walk in the emergency room. Nurses are very often the first ones to receive a patient, make a detailed interview, history taking, assess vitals including ECG and do initial interventions such as administering oxygen, starting IV lines and of course starting CPR even before doctor's orders. This fast-paced routine is set up to be able to deliver care immediately as we have few doctors and the doctors had to rely on nurses' reports, assessments and initial interventions before they proceed with the course of care. This also means that nurses have more hands-on training, bigger responsibilities as we always have to do something first before the next doctor is available and we have more interaction with the patients. We know that every second count in saving one's life so nurses have to act fast, more independently and be resourceful.

Biography

Shae Krizia Romualdo has pursued her Bachelor of Science in Nursing from Saint Louis University. She has worked as a Registered Nurse in Attendo Suomi. She is currently working as a Practical Nurse in Finland.