



9128 N. Lindbergh Dr., Peoria, IL, 61615 Phone: 309-692-5337 www.ilbcdi.org

Emergency Care

Needing to visit the emergency department (ED) can be intimidating and unknown, but if you have an idea of what to expect and how you should communicate with the staff at the ED, the experience can be less of a challenge.

10 tips for your visit to the ED:

- 1. Call BCDI (309-692-5337) before you go.** The staff at BCDI will call ahead to the ED to make them aware that you are coming, what your diagnosis is, and what is currently going on with your health. This may help any ED staff who may not be familiar with your diagnosis and how to treat it to be less anxious.
- 2. Items to take with you to the ED.**
 - Factor concentrate if you have it on hand at home.
 - A list of your current medications
 - Insurance information
 - Special medical supplies that you may have, such as port needles
 - Any medical records you may have

It may even be helpful to keep the majority of these supplies in a bag that is easy to grab in the case of an emergency.

- 3. Provide information about your specific needs.** In many cases, you will likely be more knowledgeable about your bleeding disorder than some or all of the staff in the ED. Because you live with this bleeding disorder every day, you deal with the specifics of it on a day to day basis. This doesn't mean that the staff in the ED is incompetent when it comes to your diagnosis; rather, it just means that if in doubt, you should give them information about your diagnosis and explain the specific needs you have related to it.
- 4. Remember that emergency departments have to prioritize patients.** Even though your HTC staff called ahead to let the ED know you were coming, remember that some patients still may take priority over what is going on with you. For example, individuals who are having symptoms of a heart attack or stroke almost always take precedence over the majority of other patients in the waiting room.
- 5. Bring your own factor if possible.** This may help avoid mistakes. Some EDs may not carry your specific factor and/or may not have the dose size that you need for your specific symptoms.

6. **Ask the ED staff if they have spoken to someone at BCDI before you are treated.** This helps to avoid you being sent home from the ED without appropriate treatment or an appropriate plan for follow up.
7. **Remember to pretreat if advised to by BCDI.** Most often, if you have any type of invasive procedure in the ED/hospital, you will need to have been treated beforehand with factor.
8. **Stay calm and treat the staff at the ED like you would want to be treated.** Being friendly, cooperative, and offering to help usually gives the best results. If you feel like your wait has been too long or longer than you were expecting, politely ask the staff if they know how long your wait might be and if the department is backed up/busy.
9. **Be prepared for a long visit.** Visits to the emergency department can take several hours. If you are feeling well enough, take something with you that you can do while you are waiting.
10. **Call us to tell us how it went.** Many times, the ED staff will call your Hematologist to get a treatment plan, but your HTC staff always wants to know what the recommendations were so that they can make sure appropriate follow up is in place.

Emergency Care Reference

This online reference document

(<https://www.hemophilia.org/sites/default/files/document/files/252%20ER%20Management.pdf>) is for ED personnel who need to initiate treatment for a patient with Hemophilia in the Emergency Department. This document has guidelines and recommendations for appropriate factor doses. However, each Hemophilia Treatment Center (HTC) may give recommendations that are specific to that HTC, so the patient's HTC should be contacted if at all possible. This way, the ED staff can communicate with the professionals at the HTC to obtain details specific to the patient's bleeding disorder, bleeding episodes, and recommended treatment.