

# Med ECG

Medical Educational Consulting Group

## **Using Computational Modeling For Assessing and Improving Operational Management at Michigan Medicine Emergency Department**

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# Problem Statement

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**What is the optimal throughput model of patients  
in the Michigan Medicine ED?**

# Solutions for Crowding

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## Physician in Triage

Skilled personnel at Triage shown to increase efficiency:

- Nurse
- Physician's Assistant
- Attending

## Fast Track

Streamlined treatment of non-urgent patients

- Recently, widely adopted
- Typically staffed by senior staff
- Selectively implemented during peak traffic

## Vertical Treatment

Waiting rooms for mid-acuity (ESI 3) patients

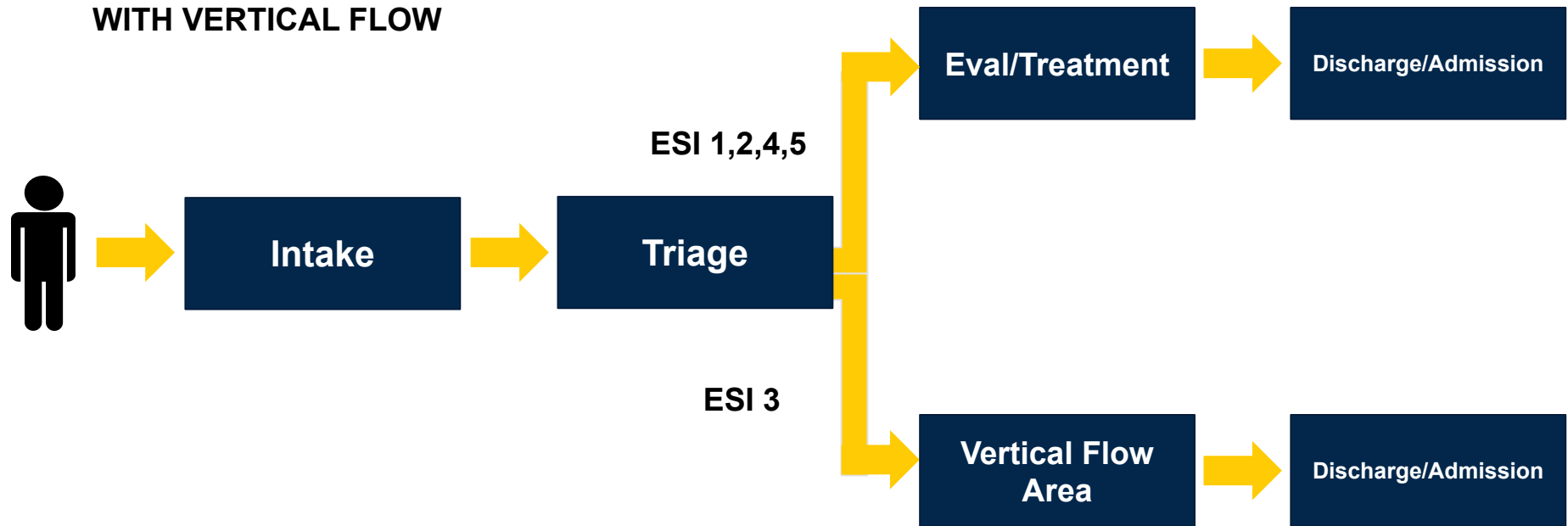
- Less bed utilization
- Allows for ESI escalation

# Patient ED journey pathway without vertical flow

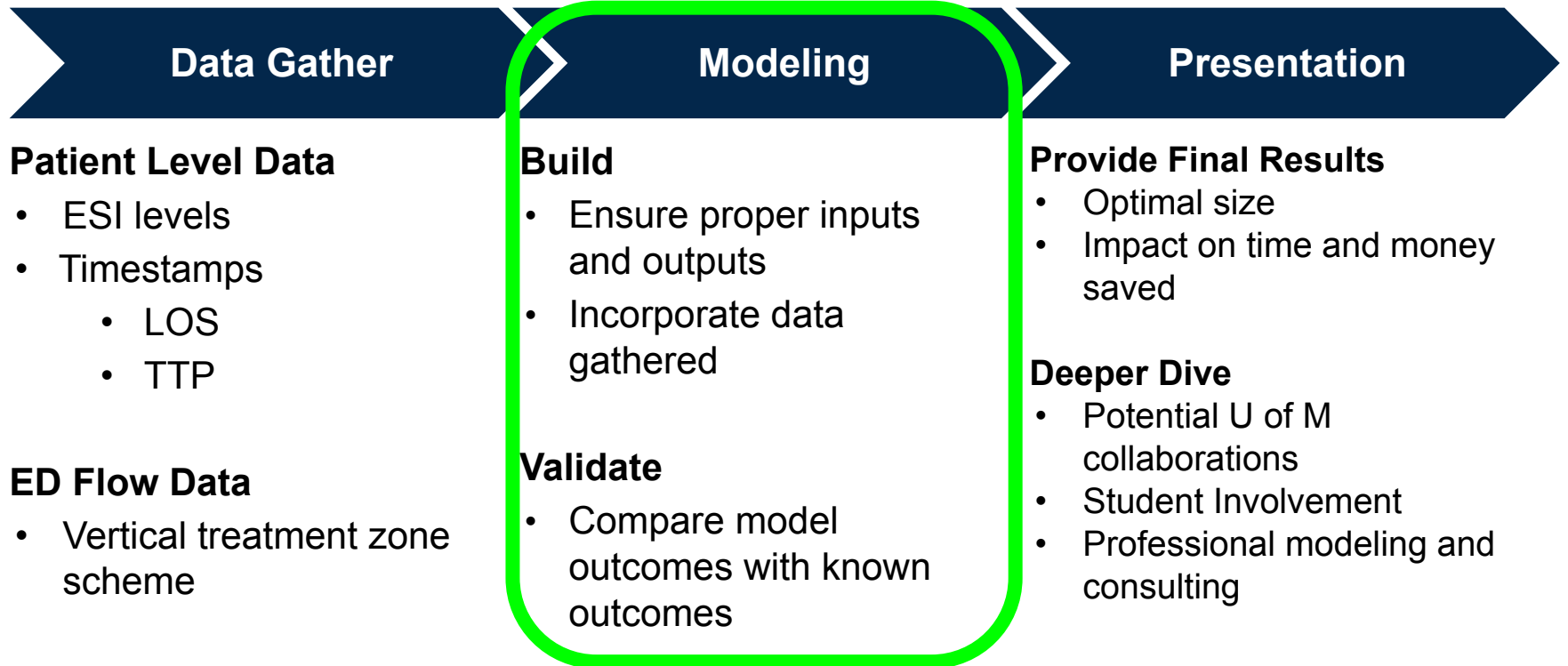
WITHOUT VERTICAL FLOW



# Patient ED journey pathway with vertical flow



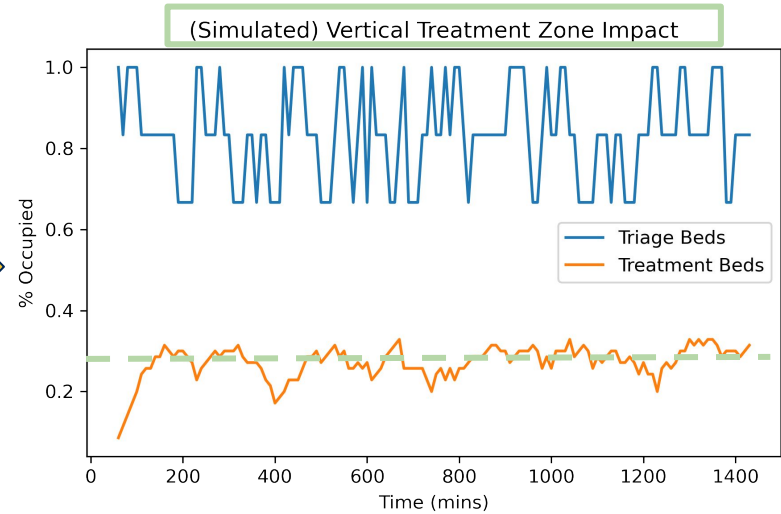
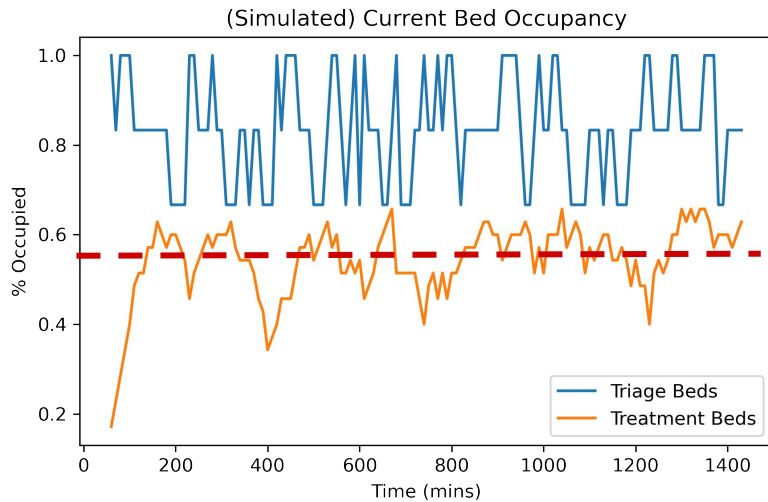
# Implementation Pathway:



# Patient Flow Modeling Options (Wiler et. al. 2011)

<u>Modeling Type</u>	<u>Description</u>	<u>Ability to Forecast ED Crowding</u>	<u>Ability to Predict Process Improvement Impact</u>
Formula-Based	Past experiences of ED flow used to posit formulas	Poor	N/A
Regression-Based	Statistically predicts dependent variables based on independent variables	Fair	Poor
Time-Series Analysis	Statistically uses recent past performance to predict current and immediate future performance	Fair	Poor
Queuing Theory	Mathematical formulas derived from system principles, utilizes many underlying assumptions	Poor	Good
<b>*Discrete-Event Simulation</b>	Computer-generated model used to sample inputs and generate outputs, *most frequently used in literature	Fair	Good

# Preliminary Results:





# Our Team

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