

Disproportionate Availability between Emergency and Elective Coverage: a National Trend?

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Background: Traumatic hand injuries represent approximately 20% of emergency department visits, yet access to emergency hand care remains inadequate. Recent surveys from several states report a wider availability of hand specialists providing elective care. The authors aim to examine this phenomenon in the state of New Jersey, and whether there is a national trend towards disproportionate availability between emergency and elective hand coverage.

Methods: A survey was conducted by telephone, email, and fax in August 2014. To assess the availability of hand surgery coverage, the following questions were asked to the medical staff coordinator or director of emergency department: (1) does your hospital provide elective hand surgery? and (2) is there a hand specialist/surgeon on call always, sometimes, or never?

Results: A total of 59 hospitals were called with a 63% response rate ($n = 37$). 82% of hospitals offered elective hand surgery while only 63% provided immediate hand coverage. 8% of hospitals had a hand surgeon on call occasionally and 18% never did. Less than 50% of the hospitals located in the same county as a level 1 trauma center provided 24/7 hand care.

Conclusions: There is a discrepancy between emergency and elective hand care in New Jersey. Similar findings across Florida, Massachusetts, upstate New York, and Tennessee suggest a concerning trend of gaps in access to hand healthcare. As disproportionate availability between emergency and elective care lead to suboptimal patient care and unnecessary transfers, a nationwide system that can appropriately triage and treat patients is warranted.