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Introduction

Nurse is a person that is strong enough to tolerate anything and kindly be able to understand everyone. In emergency preparedness, the rule of thumb is always to expect the worst. An emergency nurse (EN) are valuable but, undefined¹.

Case report

A 30-year-old man presented with hypovolemic shock following motor vehicle accident (MVA). The charge nurse (CN) calmly verbalizes the need for trauma team activation, bleeding control prioritization, stabilize the life-threatening condition and prepare equipment for definitive airway. His blood pressure was 60/30 mmHg and heart rate 120 beats per minute. Resuscitation team consist of an emergency resident and two experienced emergency nurses (Fig. 1). First EN on the patient's right side responsible to remove patient's attire and obtain vital signs while the second EN placed cervical collar and insert two large intravenous access. Primary survey done by EN revealed a laceration to the left upper arm with pulsatile bleeding, controlled with direct pressure and tourniquet placed which stops the arterial bleeding. Hemostatic resuscitation consists of emergency 'O' blood and intravenous tranexamic acid initiated by CN. Shock index improved with rapid blood products transfusion managed by EN through the Level-1 infuser (Fig. 2). First pass success intubation done by emergency resident (Fig. 3). The initial e-FAST was negative remainder of the primary survey and secondary survey performed. Warm blanket was placed to prevent hypothermia. Primary survey chest x-ray reveals endotracheal tube in appropriate position and no significant thoracic injuries. Then a good patient care report and followed by passed over by EN to Trauma OT. Finally, we conducted team debriefing as reflection.



Fig. 1



Fig. 2



Fig. 3

Discussion

It clearly shows that with sufficient personnel, adequate competency, resourceful equipment and optimizing respective role in a team leads to smooth execution and better outcome³. The role of the nurse in emergency department has evolved over recent years¹. There is a huge shortage of nurses specialize in Emergency and Acute Care because being denied specialty recognition, poor awareness, inadequate future career plan and lack of highly vision leadership². Significant challenges faced by EN which broadly encompass difficulties in practice, education and professionalism⁴. It would take an extraordinary leadership quality to steer Malaysian Nursing in tandem with other medical professions². Overall, the potential impact on the development of the Emergency Nursing profession in Malaysia is encouraging if health systems embrace thus challenge.

Conclusion

We need highly motivated people to change hearts and minds. The importance of continuous training, education based on evidence-based medicine and the necessity of research and development.

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Declaration of conflict for all authors

No conflict of interest

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