## Supplement Table 1. AAAEM/AACEM ED Benchmarking Survey, Select Questions and Definitions

Italics denotes calculated fields for comparison to EDBA values.

Question	Definition
What level trauma center are you?	Your institution's trauma center level designation (generally I
,	or II).
Hospital Admissions (exclude	Number of hospital-wide admissions, including those from
deliveries/nursery)	the ED, but excluding deliveries/nursery and observation
den veries/nursery)	status at discharge
Hospital Observations (exclude ED-based	Number of hospital-wide observations, including those that
	came from the ED, but excluding ED-based observations
observations)	,
	(these will be counted separately later)
Total Hospitalizations	Sum of Hospital Admissions and Hospital Observations
Total Number of Discharges (include	Number of patients who were seen and discharged, including
discharged observation patients, transfers and	those placed in ED OBS (not admitted as an inpatient to your
walkouts)	hospital). Please include transfers and walkouts.
Total Number of Admissions	Number of patients who were seen and admitted as a hospital
	inpatient.
Total Number of Hospital Observations	Number of patients who were seen and sent to an inpatient
(exclude ED-based observations)	bed for observation. Do not include ED-based observations.
Total ED Volume	Sum of Total Discharges, Admissions, and Hospital
	Observations above.
% ED Patients Admitted	(Total Number of Admissions + Total Number of Hospital
, v BB T attents Hamilton	Observations) / Total ED Volume
% Hospital Admissions Through the ED	(Total Number of Admissions + Total Number of Hospital
70 Hospital Admissions Through the ED	Observations) / (Hospital Admissions + Hospital
	Observations) (Hospital Hamissions   Hospital Observations)
Number of Pediatric Visits	Number of pediatric visits, as defined by your institution.
Number of Pediatric Visits	
	Exclude those patients not in the dataset being used to
O/D-P-A'-W'-Y	complete this survey.
% Pediatric Visits	Number of Pediatric Visits / Total ED Volume
Number of EMS Arrivals (exclude intra-	All EMS arrivals; air or ground (excluding intra-facility
facility transports)	transports)
Number of EMS Arrivals Hospitalized: After	All EMS arrivals that we admitted or sent to an inpatient bed
ED Evaluation	for observation after receiving ED evaluation/care
% EMS Arrivals	Number of EMS Arrivals / Total ED Volume
% EMS Admitted	Number of EMS Arrivals Hospitalized / Number of EMS
	Arrivals
Total Number of Patients that (LWBS) Left	Patients who left after registration, but before being screened
Without Being Seen by a Provider	by a QMP in triage (if present) or seen by a provider.
	LWOT/CMS reported value.
Total Number of Patients that were Screened	Patients who registered and were screened by a QMP
and Left	provider, but left before management/ treatment was fully
	started in a bed or equivalent space
Total Number of Patients that Left Against	Patients who left against the advice of the medical provider or
Medical Advice (AMA) or Eloped	eloped from a treatment room without signing an AMA form.
The state of the s	This is intended to represent patients being actively
	managed/treated, not just screened by a QMP.
% LBTC (Left Before Treatment Complete)	(Total LWBS + Total Screened and Left + Total AMA or
/o LDIC (Leji Dejore Fredimeni Compiete)	· ·
Total Number of A outs Treatment Cross-	Eloped) / Total ED Volume
Total Number of Acute Treatment Spaces	

(exclude hallway beds)	
Total Number of Fast Track/Intake/Front-End	
Treatment Spaces	
Total Number of Dedicated Observation	
Medicine Treatment Spaces	
Total Number of Dedicated Behavioral	
Health/Psychiatry Spaces	
Total Treatment Spaces	Acute Treatment Spaces + Fast Track/Intake/Front-End
Total Treatment spaces	Treatment Spaces + Dedication Observation Medicine
	Treatment Spaces + Dedicated Behavioral Health /
	Psychiatry Treatment Spaces
Visits Per Treatment Space	Total ED Volume / Total Treatment Spaces
What is the gross square footage of the ED?	22 years 2 constant and 2 constant apparent
Median Length of Stay for All Patients in	Median time from arrival to left department for patients of all
Hours	dispositions, excluding psych and walkouts (LWBS, SAL,
Tiours	AMA, Eloped).
Median Length of Stay for Admitted/Hosp	Median time from arrival to left department for admitted and
Obs Patients in Hours	hospital-based observation patients only, excluding ED
	observations and psych.
Median Length of Stay for Discharged	Median time from arrival to left department for discharged
Patients in Hours	patients only, excluding ED observations, psych and walkouts
T different in Trouis	(LWBS, SAL, AMA, Eloped).
Median Time from Arrival to Seen by	Median time from arrival to being seen by a provider
Provider for All Patients (Door to Doc)	(qualified to do the medical screening exam).
Median Time from Decision to Hospital Unit	Median time from the admit or inpatient observation
(boarding) for Admitted/Hosp Obs Patients	decision/order to when the patient left the ED for their
(coursing) for remitted frosp cos rations	inpatient bed. CMS definition is from the ED record only,
	ED provider decision, regardless of before or after an
	accepting consult or conversation. Exclude psych patients.
Professional Fee Billing: Total Number of	CPT 99284
Level 4 (99284) Patients	
Professional Fee Billing: Total Number of	CPT 99285
Level 5 (99285) Patients	
Professional Fee Billing: Total Number of	CPT 99291
Critical Care (99291) Patients	
% CPT High Acuity	(Professional Fee Level 4 + Level 5 + Critical Care 99291)/
	(Professional Fee Level 1 + Level 2 + Level 3 + Level 4 +
	Level 5 + Critical Care 99291)
Total number of visits that had at least one CT	Total number of patient visits (not number ordered) that had
ordered by an ED provider	at least one CT ordered by an ED provider.
% Patients Receiving a CT	Total visits with at least one CT ordered / Total ED Volume
Total number of visits that had at least one	Total number of patient visits (not number ordered) that had
MRI ordered by an ED provider	at least one MRI ordered by an ED provider.
% Patients Receiving an MRI	Total visits with at least one MRI ordered / Total ED Volume
Total number of visits that had at least one	Total number of patient visits (not number ordered) that had
plain film ordered by an ED provider	at least one plain film ordered by an ED provider.
% Patients Receiving an X-Ray	Total visits with at least one plain film ordered / Total ED
	Volume

Total number of visits that had at least one ultrasound ordered by an ED provider AND	Total number of patient visits (not number ordered) that had at least one ultrasound ordered by an ED provider and
performed by Radiology	performed by Radiology.
% Patients Receiving an US	Total visits with at least one US ordered / Total ED Volume
Emergency Department Physician Hours (per	Actual hours PER DAY of physician direct patient care in the
day, exclude charting after assigned shift)	main ED, excludes charting after assigned shift Per Day
Observation Unit Physician Hours (per day)	Actual hours PER DAY of physician direct patient care in the
	observation unit, if unit exists, exclusive of charting after
	assigned shift Per Day
Intake/Low Acuity/Fast Track Physician	Actual hours PER DAY of physician direct patient care in
Hours (per day)	Intake/Low Acuity/Fast Track unit, if unit exists, exclusive of
	charting after assigned shift Per Day
Total Daily Physician Hours	ED Physician Hours + Obs Unit Physician Hours +
	Intake/Fast Track/Low-Acuity Physician Hours
Emergency Department APP Hours (per day)	Actual hours PER DAY of APP (NPs, PAs, etc.) direct patient
	care in the main ED exclusive of charting
Observation Unit APP Hours (per day)	Actual hours PER DAY of APP direct patient care in the obs
•	unit, if unit exists, exclusive of charting
Intake/Low Acuity/Fast Track APP Hours	Actual hours PER DAY of APP direct patient care in
(per day)	Intake/Low Acuity/Fast Track unit, if unit exists, exclusive of
	charting
Total Daily APP Hours	ED APP Hours + Obs Unit APP Hours + Intake/Fast
	Track/Low-Acuity APP Hours
Emergency Department Resident Hours (per	Actual hours PER DAY of resident direct patient care
day)	(including off service residents) in the main ED, exclusive of
	charting
Observation Unit Resident Hours (per day)	Actual hours PER DAY of resident direct patient care in the
	observation unit, if unit exists, exclusive of charting
Intake/Low Acuity/Fast Track Resident Hours	Actual hours PER DAY of resident direct patient care in
(per day)	Intake/Low Acuity/Fast Track unit, if unit exists, exclusive of
	charting
Total Daily Resident Hours	ED Resident Hours + Obs Unit Resident Hours + Intake/Fast
	Track/Low-Acuity Resident Hours
Total Daily Provider Hours	Total Daily Physician Hours + Total Daily APP Hours +
	Total Daily Resident Hours
Patients Per Attending Hour	(Total ED Volume / 365) / Total Daily Physician Hours
Physician + APP Ratio	(Total ED Volume / 365) / (Total Daily Physician Hours +
	Total Daily APP Hours/2)
Do you utilize scribes?	·
Average total number of scribe hours per day	Total number of scribe hours per day. For example, if you
-	have three 8-hour scribes shifts each day, put 24.