

Working life (EM)

This page provides useful information about the roles and responsibilities of emergency doctors, where they work, who they work with and what they feel about their role.

How your time is spent

The emergency doctor may have limited information about a patient when they first see them. They have to use their clinical skills to prioritise what they and the team need to do to save the patient and aid the patient's recovery, sometimes without either the aid of a full diagnosis or the patient's full consent. They are responsible for the initial assessment and treatment of patients. Most patients are then discharged but some need to make a follow-up appointment with their GP. About 20% are admitted to hospital and need to see other specialists. Emergency doctors need a well-developed understanding of pre-hospital and in-hospital emergency medical systems to do their role well.

Emergency Medicine is an exciting specialty that gives you the opportunity to keep a good general knowledge of most specialties- Kasyap Jamalapuram

Emergency doctors work mainly in the Accident and Emergency Departments of hospitals. Major A&E Departments are open 24/7. Emergency doctors may also carry out their work:

- in single specialty A&E departments
- in minor injuries units
- in walk-in centres
- in inpatient hospital specialties, eg paediatrics
- in regional trauma networks
- at the scene of major accidents
- at major events, eg sports venues

Road traffic accident casualties, older people with unsupported living arrangements and alcohol and drug abusers make up a notable proportion of admissions to A&E services. Future work in EM will be affected by an ageing population with higher rates of obesity and a greater number of co-morbidities (having more than one disease).

Working hours

Like many specialties, emergency doctors must expect to do an appreciable amount of planned night-time and weekend work; but the EU [working time directive](#) [1] limits junior doctors from doing more than 48 hours per week in order for them to fit in time for their training.

“There is constant variety and challenge: exposure to a great deal of “real life” ”.
Jonathan Benger is a professor of Emergency Medicine in Bristol.

[Read Jonathan’s story](#) [2]

- Who you will work with?

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In the Accident and Emergency Department of a hospital, emergency doctors (junior doctors, SAS doctors and consultants) work alongside:

- [paramedics](#) [3] who may provide emergency treatment on the spot before transporting a patient to the A&E department
- [nurses](#) [4] who have specialised in emergency care. Some specialise in triage (sorting out the order in which patients need to be seen)
- Emergency Nurse Practitioners (ENPs) who work independently and manage minor injuries and illnesses
- hospital security and police officers who protect NHS staff from challenging patients, eg patients who abscond
- medical secretaries and [administrative staff](#) [5]

Emergency doctors also work closely with other specialties such as acute medical care and geriatrics. They also liaise with Emergency Care Practitioners (ECPs) who are specialist nurses or paramedics working in pre-hospital settings.

- Attractions and challenges of the role

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Emergency medicine attracts those who want to save patients’ lives and help them make a good recovery. It also appeals to doctors who enjoy the challenge of new patients of all ages with unknown conditions.

However, it can sometimes be a crowded and high-pressured environment with distressed or difficult patients and relatives. One of the joys of working in Emergency Medicine is being able to alleviate these problems and the strong teamwork in Emergency Medicine helps balance these pressures. It also enables doctors to learn new things; make decisions; support staff and coordinate with everyone.

Emergency doctors also have to deal with members of the public who would be better seen elsewhere; but efforts are being made to educate the public on how to choose the right medical pathway for urgent but non-emergency issues.

Rising patient numbers, workforce shortages and resource constraints have made working conditions demanding. NHS England, the Royal College of Emergency Medicine and other bodies are working to improve the system and a review of urgent and emergency care in England started at the end of 2014. In recent months there has been significant progress including a substantial increase in the workforce.

Source URL: <https://www.healthcareers.nhs.uk/explore-roles/doctors/roles-doctors/emergency-medicine/working-life>

Links

- [1] https://www.healthcareers.nhs.uk/glossary#Working_Time_Directive
- [2] <https://www.healthcareers.nhs.uk/explore-roles/emergency-medicine/real-life-story-jonathan-benger>
- [3] <https://www.healthcareers.nhs.uk/explore-roles/allied-health-professionals/paramedic>
- [4] <https://www.healthcareers.nhs.uk/explore-roles/nursing>
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