
Avoid Unnecessary Treatments in the Emergency Department:

A discussion with a health care provider can help you make the best decision.



It can be hard to say “No” in the emergency department. Nonetheless, many experts believe that talking with the health care provider you are seeing during an emergency department visit may help you be actively involved in your care, and possibly avoid unnecessary and in some cases potentially harmful testing, procedures and treatments.

That’s why the Canadian Association of Emergency Physicians lists five common procedures and treatments you should know about:

1. CT scans of the head for minor injury;
2. Neck X-rays for minor neck injuries;
3. Back X-rays for lower back pain;
4. Antibiotics for skin abscesses;
5. Antibiotics for bronchitis and asthma.

1. CT scans of the head for minor head injury:

Many people who hit their head feel a CT scan is needed to see if there is serious brain damage. Most of the time you do not need a CT scan, here’s why:

CT scans rarely help in minor head injury.

A clinician can ask you certain questions and do a physical exam to decide if you need a CT scan of your head. If the way you hurt your head was not severe and if you have a normal examination, a CT scan is usually not needed because it will not show any serious problem. So you can avoid an unnecessary test and reduce your exposure to damaging radiation.



CT scans have risks.

A CT scan uses X-rays to create a picture of the brain. X-rays are a form of radiation, which may increase your risk of cancer. Children, especially infants, have greater risks because their brains are still developing.

When you may need a CT scan for a minor head injury.

There are specific clinical findings and types of injuries that may require a CT head scan. Your health care provider is trained to look for dangerous signs or symptoms that make a CT head necessary.

2. Neck X-rays for minor neck injuries:

Many people fall, are involved in car crashes, or have sports injuries where they hurt their neck and have neck pain. Patients often come to the emergency department and expect an X-ray.

Neck X-rays rarely help in minor neck injuries.

A clinician can ask you certain questions and do a physical exam to decide if you need neck X-rays. If the way you hurt your neck was not severe and if you have a normal examination, then you do not need X-rays of the bones in your neck because it will not show any serious injuries. So you can avoid an unnecessary test and reduce your exposure to damaging radiation.

X-rays have risks.

X-rays often delay people from getting off the hard board used for ambulance transportation after an injury. This increases pain and can cause skin breakdown. X-rays use radiation, which may increase your risk of cancer.

When you may need neck X-rays for a neck injury.

There are specific clinical findings and types of injuries that may require X-rays for neck injury. Your health care provider is trained to look for dangerous signs or symptoms that make X-rays necessary.

3. Back imaging for back pain:

Many people have low-back pain, sometimes from simply bending over, and other times from unknown causes. Patients often come to the emergency department to have their pain treated and expect the health care provider to do an imaging test (e.g., X-ray, CT scans, MRI).

Imaging tests rarely help.

A clinician can ask you certain questions and do a physical exam to decide if you need back X-rays. If you are young and healthy, and if you have a normal examination, then you normally do not need imaging tests of the bones in your back because it will not show any serious injuries. So you can avoid an unnecessary test, and reduce your exposure to damaging radiation. Often pain medication works well to treat back pain.

Imaging tests have risks.

X-rays and CT scans use radiation, which may increase your risk of cancer.

When you may need back imaging for back pain.

Sometimes it may be appropriate for the health care provider to do imaging tests for back pain. Your health care provider is trained to look for dangerous signs or symptoms that make imaging tests necessary.

4. Antibiotics for simple skin abscesses:

Many Canadians go to emergency departments for abscesses (also called “boils”) - collections of pus below the skin surface caused by infection. Clinicians usually freeze the skin, “lance” or cut the skin, and drain the abscess.

Antibiotics usually do not help simple abscesses heal faster.

Usually, draining a simple abscess is enough to heal the infection. In most cases, giving antibiotics does not help heal the infection any faster than just draining the abscess.

5. Antibiotics for bronchitis or asthma

Many patients go to the emergency department for cough, wheezing and trouble breathing caused by conditions called “bronchitis” or “asthma”.

Antibiotics rarely help bronchitis or asthma.

Most patients with bronchitis or asthma do not have bacterial infections that need antibiotics.

Risks of antibiotics.

Unnecessary antibiotics can cause “resistance” in you and others around you. That means the antibiotics won’t work as well when you really need them in the future. Antibiotics may also cause side effects, such as allergic reactions and diarrhea. Some cases of diarrhea can be very harmful, particularly to elderly patients and those who have chronic illnesses.

When you may need antibiotics for bronchitis or asthma.

Your health care provider may start you on antibiotics if he or she thinks you also have a bacterial infection (e.g., pneumonia) in addition to bronchitis or asthma. Your health care provider is trained to determine when antibiotics are needed.

About Choosing Wisely Canada

Choosing Wisely Canada is the national voice for reducing unnecessary tests and treatments in health care. One of its important functions is to help clinicians and patients engage in conversations that lead to smart and effective care choices.

How this pamphlet was created:

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This report is for you to use when talking with your health care provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

Be prepared for a trip to the Emergency Department (ED)

- Get a ride. In an emergency, call 911 for an ambulance. Don't try to drive yourself.
- Keep important information in your wallet.
- Keep a list of your medical conditions and all the medicines you take.
- Carry your provincial health insurance card.
- Try to have the name of your family health care provider with you, or try to obtain a family health care provider before you have an emergency if you do not have one.
- Bring someone with you to the hospital. This person can help you explain your problem and understand and remember your follow-up care.
- If you have a chronic or ongoing illness, ask your family physician to help you understand when you should be going to the emergency department for issues related to your illness.
- If you have an ongoing medical or surgical problem that has been treated at one hospital, call that specialist first before coming to the ED. If needed, come to that hospital ED, not another hospital ED as they may not have the information or services you may need.
- Understand that there are a number of factors that may result in a wait to be seen in the ED.