TRIAGE KNOWLEDGE AMONG ASSISTANT MEDICAL OFFICERS IN AN EMERGENCY DEPARTMENT

NO.198

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INTRODUCTION

Triage is vital in emergency departments for prioritizing patient care based on severity. The assessment are using Malaysian Triage Scale. Assistant Medical Officers (AMOs) are crucial in executing triage decisions, yet their knowledge and influencing factors remain understudied.

METHODOLOGY

Sample: 60 randomly selected AMOs
Tool: Structured questionnaire (3 sections: demographics, influencing factors, knowledge assessment)
Analysis: SPSS v27; descriptive and inferential stats (ANOVA, Spearman's correlation)

KNOWLEDGE SCORE & TRANING

Average knowledge score 2.17/5

81.7% received formal training

EXPERIENCE & CORELLATION

< 5 years experience

Weak negative correlation (r=-.14) (p=.04, p>.124)

No significant differences (p>.05)

INFLUENCING FACTORS

Inaccurate info received M=4.30

Limited triage exposure M=4.20

Lack formal training M=4.07

RESULTS

Respondent showed moderate to low knowledge of the Malaysian Triage System, with an average score of 2.17 out of 5, despite 81.7% having received training. Only 10% held advanced certifications, and most had less than 5 years of ED experience. A weak negative correlation (p=.04, p>.124) showed that more experience did not lead to better knowledge.

DISCUSSION

Although most AMOs had received triage training, their knowledge scores remained moderate, indicating that experience alone is insufficient to ensure triage competency. Many relied on intuitive decision-making rather than standardized protocols, particularly under stress. Contributing factors included misinformation from patients, limited exposure to diverse triage scenarios, and the lack of structured simulation training. These findings emphasize the need for formal, reinforced education and practical skill development

CONCLUSION

This study shows that experience alone does not ensure accurate triage decisions. Structured simulation-based training, certification, and audit are essential to close systemic and experiential gaps. These measures can enhance decision-making and ultimately improve patient outcomes in emergency departments

KEYWORDS: Malaysian Triage System, Emergency Department, Assistant Medical Officer,

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