The Emergency Severity Index (ESI) system is an approach to triage level assignment that includes an evaluation of clinical severity and resource needs. It is an effective and reproducible tool for sorting incoming emergency department patients into patient care groups. It establishes five levels for assessing patients who enter the department.

This is one system recommended for segmenting patient flow. Another is the Canadian Triage and Acuity System (CTAS). Whatever system is used, basing patient-intake processes on a good one helps smooth patient flow. Both ESI and CTAS distinguish five levels of severity. If currently using a system that has four triage levels, it should be sufficient. A three-level triage system, however, is likely neither sensitive nor specific enough to improve front end flow, and should be switched to a four- or five-level system.

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**Figure 7.5: The ESI Five-Level Triage System**

1. **A** Requires immediate life-saving intervention?
   - yes
   - no

2. **B** High-risk situation? or confused/lethargic/disoriented? or severe pain/distress?
   - yes
   - no

3. **C** How many different resources are needed?
   - none
   - one
   - many
   - consider

4. **D** Danger zone: vitals?
   - HR <3 m/s 180/<50
   - 3-3y >160/>40
   - 3-14y >140/>30
   - >14y >100/>20
   - no