

ACSCs vs CTAS 4/5

Are there any differences between the Ambulatory Care Sensitive Conditions (ACSC) and the Canadian Triage and Acuity Scale (CTAS)?

ACSCs

These are a list of conditions that are used to assess the state of primary care.

They are conditions where appropriate ambulatory care can prevent/reduce hospitalizations
They are only applied to patients under age 75 as older patients may have other complicating factors.

The conditions are:

- Grand mal status & other epileptic convulsions
- Chronic obstructive pulmonary disease
- Asthma
- Diabetes
- Heart failure and pulmonary edema
- Hypertension
- Angina

More information is available at:

<https://indicatorlibrary.cihi.ca/display/HSPIL/Ambulatory+Care+Sensitive+Conditions> and
<https://www150.statcan.gc.ca/n1/pub/82-622-x/82-622-x2011007-eng.pdf>

CTAS

The CTAS is a reliable and valid tool for emergency department (ED) triage.

It enables ED staff to prioritize patient care requirements patients according to acuity, risk, and care needs based on their presenting signs and symptoms

The levels are, with examples:

- Level 1 – Resuscitation (cardiac arrest, major trauma)
- Level 2 – Emergent (vomiting blood, hypertension with symptoms)
- Level 3 – Urgent (vomiting/nausea, hypertension w/o symptoms)
- Level 4 – Less Urgent (confusion, UTI complaints)
- Level 5 – Non-Urgent (diarrhea, dressing changes)

More information is available at:

<https://ctas-phctas.ca/>