**Interview**

The main sorting within the damage is broken or bleeding, within the damage - not true - it is the first to arrive. There are a number of Ullevål Hospital, such as Emergency Department began 105 years ago - that an injury clinic.

So when you go into the damage wounds or breaks - the other - it's category psychiatric patients between four and twelve or weekends from eight to twelve - it's specialists in psychiatry actually working with us. How you can be entered directly into the psychiatrist - they are champions Norway in suicidality. There is no better than them - they are the most trained of all. There are two categories. Then you can print directly to the social service if you have a social problem and you have not managed to fall into the social security office.

Is there anyone who is there all the time?

They are there 24 hours a day. And then you can be entered on the public. And then you have - not true - something that is not broken or sewn or plaster, but that is - in a way the rest.

And there have their own staff - these four units - so that when people are wary, they are always wary of these four devices?

And we - the social security service's populated with social workers, psychiatric emergency room is populated with psychiatrists, but we are physically very close to each other. It is hugely important - it is vastly more important than the kind of speeches about cooperation - that we are door to door. Not true - that we can go in to each other and stuff. Then there are wounds and fractures are next - We note the that we have been separated from them. Before the roll Trusted nurses throughout the house - between wounds and fractures and the Public. We have a kids section as well, yes, I forgot to say, it is part of the general section, but it is a kids section which is open day and night but that is closed at night. And then we have an emergency key - but there is nobody who enroll. There is only service and IT people.

Are there any devices at a lower level than this? Some sub-assemblies.

So there is - to manage the real emergency bases in the city. But they are only populated - I was about to say - they are populated with GPs or their substitutes. They have a way - where we are organizing framework for their medical practice. But we they work there as independent practitioners. So that it has limited instruction on them.

But those who are sitting there with the kind of earmuffs on his head, they are part of the emergency room?

Yes it is called emergency center. If you can imagine - when you dial 113 you will come to the control panel that sits down at Ullevål - not true. It is life and health - emergency relief - and it's part of the caller 113 that is unsorted or wrong or anything like that. And if that's the way that it is not as it is set to the emergency center. Then there is the meeting between the state and local government - between arr and emergency care center. And so we get a lot of phones to us. Everything from how we are on holiday in Thailand and they have added Doctor - I have a trick - swollen - what should I do, I will go to the doctor or not. So all possible, I have forgotten a brown shoes with you yesterday - or - that the whole package. While sitting emergency center and - I forgot to say - sort home visits actually. Prioritize and sort the home visits. So there is a huge and very complex organization.

That very informal organization. A standard question which could be how the pattern when people are eating - who eats people matt packed with?

Doctors are eating with the doctors.

Are all doctors?

No, we have to do it in shifts - not true. because ...

Across departments?

No, no no. It .... The surgeons eat with surgeons, we eat together. And it is virtually. And then on Friday we have a common lunch doctors and nurses at the General - and when we buy food and then we share. We pay 25 crowns. We can not like pie orgy on Friday - so we'd rather eat good food and then create it.

But it is - it is an expression of the need to organize it so that doctors and nurses to eat together?

Yes I think so because they eat basically in two different places. We eat up in the cafeteria and eat down on a dining room for any reason. Why it has been so I do not know, but that's it. And that evening when eating doctors and nurses together as is the cafeteria open. So when you sit on a like break room and watch TV and eat a little bit and then it is a fridge and a little kitchen next door. Then, some hot food if they have it with something like noon meals and stuff.