

(2) student resilience increased dramatically compared to those in regular social work programs.

Keywords: emergency; disaster; mental health; psychosocial; social work; stress; training; trauma

Prehosp Disaster Med

Successful Emergency and Disaster Preparedness Course in Israel for Physicians from North America

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Introduction: Since the attacks of 11 September 2001, emergency preparedness has been a priority for healthcare professionals in North America. Therefore, in 2003, with the support of the Israeli Ministry of Health (MOH), the American Physicians Fellowship (APF) created a training program for emergency and disaster preparedness in Israel that was designed for physicians and healthcare professionals. The course encompasses mass-casualty issues, from risk communications, first response, hospital care, and the psychosocial impact on the population, and is based on the Israeli experience.

Methods: The APF's Emergency and Disaster Preparedness Course in Israel is a five-day program conducted twice each year. Lectures from renowned physicians and site visits are held at hospitals throughout Israel (with participation in large, mass-casualty drills), the Ministry of Health, Magen David Adom, Israel Defense Forces Medical Corps bases and population centers that have been under frequent attack. Course participants have hands-on experience at the Messer Simulation Center in treating victims of conventional and CBRN events. The course offers CME credit.

Results: The course has provided approximately 300 attendees with emergency and disaster preparedness training that continues to be relevant eight years after 9/11. Participants are asked for continuous feedback during the course and complete comprehensive written evaluations. These evaluations have been excellent, averaging between 4–5 out of 5. Written comments often include "best course ever taken" and express satisfaction with the content, faculty, drills, and especially the hands-on simulation sessions and site visits. Several participants have become leaders in emergency preparedness in North America

Conclusions: The APF Course in Emergency and Disaster Preparedness has been successful in providing a large number of participants with relevant training in disaster management that is applicable to their healthcare facilities and local communities in North America.

Keywords: disasters; education and training; mass-casualty incident; physicians; preparedness

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Psychological Impact of Terrorist Attacks on First Responders: Influence on Post-Traumatic Symptoms among Volunteers in Ambulance Teams

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Introduction: Terrorist attacks may cause severe post-traumatic stress symptoms among first responding personnel, due the horrors and the atrocities witnessed, and to the fact that they are human-made—not caused by accidents. The aim of this study was to determine this special psychological impact. To test this impact, two separate studies were conducted: one compared two cohorts of Magen David Adom (MDA) young volunteers and the other compared volunteers, who witnessed terrorist attacks with those who did not.

Methods: In the first study, the level of post-traumatic symptoms (PTS) was evaluated during the years 2000 (before the massive terrorist attacks in Israel) and 2002 (during such attacks, which began at the end of 2000), in two cohorts of adolescent MDA volunteers (mean age: 17 years). Both cohorts completed a basic and an advanced course in first aid and have volunteered actively for one year. In the second study, volunteers in the 2002 cohort who witnessed terrorist attacks were compared to volunteers who did not.

Results: Overall, PTS were low, and never reached a clinical level. However, PTS were significantly more prevalent in the 2002 cohort: physiological symptoms were five times more prevalent, and sleep problems increased by a factor of three. Among the 2002 terrorist attacks cohort, volunteers who were exposed to terrorist attacks reported 2–3 times more symptoms than those who were exposed only to routine events.

Discussion: The results indicate the special psychological burden of terrorist attacks on first responders, specifically on adolescent MDA ambulance team volunteers. The willingness to volunteer, combined with the professional training the volunteers receive prior to their work and the continuous attention to their emotional state, all contribute to their strength and ability to cope with painful sights. This is helpful during routine events, and mostly needed during times of terrorist attacks.

Keywords: adolescent; Magen David Adom; post-traumatic symptoms; psychological impact; terrorism; volunteers

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Local Authority Functions in the Field of Civil Defense

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The local authority is a major factor in the treatment of a population, and assistance in emergency situations due to its primary interface with the population with all stakeholders. It has the emergency powers associated with state responsibility.

The local authority is responsible for civil defense in its territory under the Law. Its first and foremost responsibility is to enforce civil defense instructions and act accordingly.

The purpose of this document is to define and list the duties of local authorities, including preparing for war operations in emergencies.

Authority roles in civil defense include:

1. Budget management;
2. Supervision and control of building shelters and protected spaces;
3. Activating, mapping, and planning emergency shelters;
4. Preparing an information campaign;
5. Population intelligence data preparation, mapping with an emphasis on special populations in community institutions, both in coordination with Home Front Command;
6. Preparation of facilities and teams to absorb the evacuees;
7. Preparation of an Operations Center;
8. Enforcement of laws and regulations on hazardous materials;
9. Perform training and provide seminars for employees of the Authority to prepare for emergencies;
10. Participate in exercises, seminars, and courses on the Home Front Command emergency; and
11. Prepare an array of volunteers.

This presentation will discuss the local authority functions relating to civil defense.

Keywords: budget; civil defense; emergency; local authority; supervision

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Simulation as a Training Method

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Simulation is an imitation of a complex reality using a suitable model. One of the goals of this training system is to improve coping results in real time. The use of simulations has existed in the military for centuries. Various situations can be simulated, including life-threatening situations.

At the field level, medical teams cope with many challenges. They provide medical assistance to casualties in a wide variety of situations, sometimes while risking their own lives. Medical teams prepare for the war, and include the dispatch of forces and provision of medical assistance during low-intensity conflicts, urban warfare, and other situations.

Medical teams practice various medical procedures, such as intubation and chest drain insertion.

Recently, simulation training has been used in routine medical service. Military medical schools use different types of simulation to address these needs. In this simulation of urban warfare, medical teams practice how to provide medical assistance under fire (using audio equipment). The training in this simulation facility mainly emphasizes the military behavior before and during medical treatment and medical evacuation in combat situations.

Medical simulators enable the practice of lifesaving medical procedures that cannot be practiced otherwise. The training in this facility mainly emphasizes the quality of medical care and the practice of different procedures.

The medical teams in both facilities include a physician or paramedics and medics, exactly as these teams operate on a real battlefield. Recently, simulation facilities also have

been used for training for routine medicine. This simulation emphasizes the quality of routine medical care and service provided by the medical teams, medics, and physicians.

In summary, simulation is an important tool of medical teams training in the Israel Defense Forces. Simulation enables training and practicing in different situations and improves the sense of ability of the medical teams to cope with different situations.

Keywords: military; simulation; training

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Admission of Evacuated Mass Casualties—Experience of the Gulhane Military Medical Academy

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The quality of medical aid given to injured people during a mass-casualty incident is related to the success of general organization.

Fast and effective intervention is important for each of the steps. In case of mass-casualty incident, people with mild injuries may be treated at a field or local hospital. Resuscitative interventions and damage control surgery for severe cases should be performed in field hospitals. Patients requiring further treatment should be referred to a third-level hospital. Larger hospitals should have plans for such unexpected events. It is difficult to care for many injured patients at the same time, even for third-level health centers. Severely injured patients may worsen during the admission process if the hospital is not prepared to cope with their current status. This report aims to discuss hospital organization for mass casualties using the experience of a group of patients injured in a bomb attack in Iraq and who were transported airmedically and admitted to Gülhane Military Medical Academy.

Keywords: airmedical evacuation; bomb attack; hospitals; mass-casualty incident; organization

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Stress Inoculation Training for Emergency Room Nurses in Tel-Hashomer Hospital

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Emergency department nurses are exposed to a variety of stress factors, different in form and intensity. These stressors are perceived to be a part of routine work, and therefore, staff is expected to perform to the best of their abilities. Also, a nurse's life is inlaid with events of extreme stress: limited in time, but extraordinary in their intensity, after which s/he is expected to return to full, professional function.

The different stress factors have many undesirable consequences and affect many areas of a nurse's life, including: (1) commitment to the organization; (2) quality of work; (3) health; and (4) quality of the service. Family life is another area outside of the work place that is influenced by stress factors.