Reports of the Chairs of the Scientific and Invited Papers 15th World Congress for Disaster and Emergency Medicine

13-16 May 2007 Amsterdam, The Netherlands

EMS Systems System Design

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In a well attended session with >70 participants, the session on EMS System Design was the first of four in a one-day-track to focus attention on the diversity, training, clinical aspects, and component integration of prehospital care. As an introduction to the complexity of the subject, the chair provided a brief overview of the current state of emergency medical services (EMS) and also described the different types of system designs from an international perspective. The presentation explained the structures of different delivery systems and the local role in the development of EMS, and provided a foundation for the thought-provoking presentations that followed.

The process of introducing specific training programs to upgrade EMS in Uzbekistan was described. Using a train-the-trainer approach and curriculum developed by the US Department of Transportation, >7,000 students participated in an initial responder course provided at 10 training centers throughout the country. Included in the student population were disaster responders, firefighters, and road police. Focus groups were brought together after completion of the courses and it was agreed that the response capability had been improved. However, questions remain regarding sustainability and the continued need of equipment.

A benchmarking project that was constructed to compare diverse rural systems in three countries—Sweden, Scotland, and Iceland—was described. Benchmarking is difficult in the best of circumstances and the differences required careful analysis. A description and data were presented for each system and compared. This project provides the foundation for future work.

A defined local need and the process employed for results were identified. Over the past decade, morbidity and mortality from traffic crashes in Crete have continued to rise at an alarming rate and a comprehensive analysis was conducted. The approach included not only analyzing patient data, but also road construction and conditions. By using a combination of communication technology, new dispatching triage techniques, and advanced training, the morbidity and mortality rates have stabilized. In addition, the inclusion of road engineering changes serve as a prime example of the role

research and how an interdisciplinary approach can impact prevention in prehospital care.

The different EMS systems, component needs, and research approaches exemplified the overview provided by the chair during the opening presentation. As a result, extensive discussion was stimulated regarding the importance of EMS and its role in the healthcare continuum. Prebospital Disast Med 2008;23(4):s79

Prehospital Triage and Networking

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The focus shifted to the specific components of an EMS system, rather than the overall design. As with the opening session of the EMS Systems track, >50 participants were in attendance and the questions and discussion provided additional input into each area.

Problems from the systemic response to previous masscasualty incidents was the genesis for the research and approach that resulted in the solutions presented. A comprehensive victim tracking system (VTS) uses bar code technology that allows the transmission of patient demographics, condition, and treatment to a receiving facility. In addition, information is communicated with an identifier for tracking purposes, and is independent of other applications. Quick notification of the nearest relative and electronic integration with medical records are additional benefits.

As EMS demand continues to increase worldwide, different pilot and research projects have been conducted to examine alternatives to responding and transporting non-emergent patients. Development of a physiological scoring mechanism was described that helped to identify those patients not needing a response. Recognizing that overtriage is inevitable, the proposed protocols provided a framework for estimating that 35% of the patients from the studied system could be managed without the intervention of an emergency department. Ethical considerations also were studied, and there were no adverse impacts.

The debate over which advanced life support (ALS) interventions have an impact on patient outcome, if they have an impact, continues in peer-reviewed research and among the public. The results of an extensive literature review to discern the best approach for a community examining its care options was described.

The results were included in a report outlining that though ALS training is standardized, ALS interventions