

### (35) Knowledge of Advanced Trauma Life Support Guidelines among Trauma Team Members at a UK Hospital Trust

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**Introduction:** The aim of a hospital trauma team is to safely and efficiently evaluate and manage emergency patients. The Advanced Trauma Life Support (ATLS) Guidelines represent an accepted foundation for practice. This study investigated the levels of knowledge of these Guidelines among junior doctors at one UK hospital trust.

**Methods:** An ATLS knowledge-based test was administered to junior doctors who routinely comprise the trauma team.

**Results:** A total of 43 trauma team members (consisting of 16 foundation year (FY) doctors, 14 senior house officers (SHO) and 13 registrars) completed the test. Seventy-nine percent reported that they felt confident with their role during a trauma call. The mean score in the test was 48%. Across specialities, the mean score of the FYs was 32%; SHOs 60%; and registrars 52%. At SHO and registrar grade, general and orthopaedic surgeons mean score was 72% and 62% respectively, while the mean score for anaesthetists and emergency physicians was 48%.

**Conclusions:** Most junior doctors involved in trauma calls were confident of their roles during a trauma call. Knowledge of ATLS guidelines was dependent on the grade of doctor and their speciality. Senior house officers in all specialities scored higher than registrars, perhaps reflecting their recent preparation for postgraduate examinations. Advanced Trauma Life Support knowledge scores were significantly higher for surgical and orthopedic SHOs and registrars, when compared with anaesthetists and emergency physicians. These results reveal a deficiency in ATLS knowledge in the latter two specialities. Senior house officers scored higher than registrars, questioning the necessity of an on-site registrar trauma team cover.

**Keywords:** Advanced Trauma Life Support, education; hospital; training; trauma team

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### (36) Triage Exercise Organizing and Make-Up and Moulage Kit Application Course

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One of the important issues concerning triage preparedness is the practical preparedness applications, as theoretical methods may not be enough. The Triage Exercise Organizing and Moulage Kit Application Course, which was organized for the first time in Turkey, was an example of a preparedness activity including both theory and prac-

tice. The course was organized as a training course for trainers for the National Medical Rescue Team (UMKE) of Turkey 27–29 July 2006. Twenty-seven UMKE personnel from three cities participated. Triage techniques and usage of the moulage kit were taught during the theoretical lectures. These techniques were examined in the field during the last day. The participants worked in four groups: (1) moulage kit usage team; (2) triage medical team; (3) field first aid-tent preparation team; and (4) the causalities. The participants had a chance to work in all four teams. The timing and the correct categorization results of the triage team and the field first-aid tent preparation timing were evaluated.

This course was shown to be the best learning method for triage lectures. The need to practice these techniques in the field was demonstrated where there are many wounded causalities who were prepared with moulage kits. A country's National Medical Rescue Teams should have triage training supported with simulations and organized triage drill lessons. This would allow them to learn more and better organize their triage drills.

**Keywords:** education; moulage kits; training; triage; triage drills

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### (37) 2006 Training Exercise of the Second Turkish National Medical Rescue Teams in Kayseri

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To mark the anniversary of the Marmara Earthquake of 1999, a training exercise was conducted in the Erciyes Mountain Region in Kayseri, Turkey 15–19 August 2006. The goal of the exercise was to improve the coordination of the National Medical Rescue Teams (NMRTs) with other governmental and non-governmental organizations. A different format was used for the planning and preparation of the exercise camp. Logistical support was provided from Ankara and Kayseri Provinces. The contact information of the teams was obtained, and the basic needs for the arrival day were provided. The teams were required to be self-sufficient during the five days of the exercise. Civilian volunteers from the region were moulaged and acted as victims. The NMRT units from 11 districts, as well as a team from a neighboring country participated in the exercise. A total of 700 personnel participated in the overall exercise. The exercise was open to the public and the media. There were 12 separate incident sites in which the teams operated according to different scenarios. The NMRT worked in collaboration with the regular Search-and-Rescue Teams. This exercise was the first of its kind in Turkey.

**Keywords:** drills; exercise; National Medical Service Teams; scenarios; Turkey

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### (38) Disaster Medicine Should Be a Separate Medical Specialty

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Disaster medicine is a medical specialty. It should not be considered a sub-specialty. With this as a goal, countries

around the world should work toward scientific achievements in this particular field. Considering the enormous disaster potential in Turkey, Turkey should lead the way in contributing to the specialty of disaster medicine. This should be an institutional, social, national, and global responsibility. Worldwide efforts also should serve this need with similar intentions. Disaster specialists should be certified, because that could result in an increase in the number of articles published in international journals. If disaster medicine was considered a separate specialty, global academic advancement could be made in the field. Today, academicians do not seem to be interested in disaster medicine because there is not much they can contribute to the field. But if the specialty could be established, there would be more comprehensive goals in the field of disaster medicine. In this study, the idea that more scientific studies relating to human lives could be performed if the disaster medicine is set as a separate specialty of medicine.

**Keywords:** disaster medicine; education; international; medical specialty; medicine; Turkey

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### (39) First Responders First: A Model for Prophylaxing First Responders during an Epidemic

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In the United States, the national plan for population-based emergency vaccinations or prophylaxis calls for protecting first responders (e.g., fire, police, emergency medical services (EMS), public health, and hospital staff) first. The Nassau County Department of Health (NC-DOH) developed a plan to operate first-responder point-of-distribution clinics (FR-PODs) through the county's 71 local volunteer fire/EMS departments and police departments.

The NC-DOH collaborated with these agencies to develop a FR-POD plan. In this plan, the majority of the staffing came from a variety of volunteer groups, including firefighters, emergency medical technicians, Medical Reserve Corps (MRC), and Community Emergency Response Team (CERT) members. Over the course of one year, this diverse group of volunteers received training on the incident command system, basic POD operations, the role of MRC and CERT volunteers imbedded in a FR-POD, and the role of public health during an epidemic. At each training program, pre-/post-tests and a course evaluation were administered. In June 2006, the ability of the volunteers to perform in the FR-PODs was tested during a large scale, county-wide drill that included the police, nine fire/EMS departments, and 12 hospitals. Paid and volunteer workers ( $n = 674$ ) who received FR-POD training processed 4,246 recipients over 4–6 hours. The plan and the training were successful. Volunteers were able to perform their emergency response functional roles, problems or issues were rapidly identified and addressed, the average thru-put time for recipients was approximately 20 minutes, and 99% of recipients would have received the correct medication as per the established protocol.

**Keywords:** education; epidemic; first responders; prophylaxis; training

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### (40) University Students Triage Training (A Preventive Program)

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**Introduction:** As societies are developing, the necessity for professional interventions in order to protect the health of the people is becoming clear. The increasing population and lack of professional personnel are among the factors increasing the risk coefficient. In addition to reinforcement troops, there are other human resources that can provide suitable support. If medical triage courses are successful in educating students, they may provide potential support for triage. The aim of this research is studying the need for the medical education in triage from the students' perspective.

**Methods:** The perspectives of 100 students (46 female, 54 male) of various fields in the University of Tehran were assessed using a self-reporting questionnaire.

**Results:** Of these students, 95% expressed that triage education should be a requirement, 95% believed this education is not merely for reinforcement troops, and 90% believed that an experimental (practical) credit should be added to the university course. Ninety percent declared that education in triage helped increase family members' sense of security.

**Discussion:** Students from every society can act as a logistic force during a disaster response. Thus, the implementation of a practical credit in the university can help familiarize triage fundamentals and must be considered as a preventive program.

**Keywords:** education; Iran; personnel; students; triage; university

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### (41) Use of a Highly-Equipped Manikin in Cardiopulmonary Resuscitation Classes Could Improve the Efficacy of Training

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**Objectives:** Medical students are expected to be able to perform basic life support. A prospective study to assess the level of cardiopulmonary resuscitation (CPR) skills of medical students after completion of a manikin-assisted CPR classes was performed.

**Methods:** One hour after attending a CPR class, 68 medical students participated in a prospective, observational study. A full-torso manikin was connected to a computer. The students performed CPR for two minutes, and the number of ventilations, average tidal volume, rhythm of compressions, and compression depth were recorded.

**Results:** The compression rate was between 90–110/min in 82% (56/68) of trials, while 18% (12/68) were >110/min. The compression depth was 40–50 mm in 47% (32/68), <40 mm in 12% (8/68), and >50 mm in 41% (28/68). Four students (6%) managed to perform two rescue breaths, 12 (18%) succeeded in four attempts, 16 (24%) in five attempts, 20 (28%) in six attempts, and 16 (24%) in eight