(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 anes-thetists 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 anesthetists 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 Prebosp Disast Med 2007;22(2):s24

(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-

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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 personal from three cities participated. Triage techniques and usage of the moluage 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 Prebasp Disast Med 2007;22(2):s24

(37) 2006 Training Exercise of the Second Turkish National Medical Rescue Teams in Kayseri *M. Eryilmaz*

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To mark the anniversary of the Marmara Earthquake of 1999, a training exercise was conducted in the Ercives 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