- Cycling Events
- Multi-Sport Events
- Obstacle Adventure Courses
- Staged Wilderness Courses
- Amateur Games
- Political Gatherings & Orations
- Religious Gatherings & Pilgrimages
- Community Gatherings (e.g., Parades, Fireworks, etc.)

Discussion: Complex team learning to standardize real-world approaches has been accomplished in other medical domains (e.g., ACLS, AHLS, ATLS, PALS, etc.). A course for event medicine should not re-teach medical content (i.e. first aid, paramedicine, nursing, medicine); it should make available a commonly understood, systematic approach to planning, execution, and post-event evaluation vis a vis health services at events. A 'train the trainer' model will be required, with business operations support for sustainable course delivery. The author team seeks community feedback at WCDEM 2019 in creating 'the ACLS' of Event Medicine.

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Critical Care Specific Medical Materials Preparedness in the Emergency Department for Mass Shooting Disasters

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Introduction: There has been a dramatic increase in the number of mass shootings (loosely defined as an incident with four or more indiscriminate victims) in the United States (1). Additionally, the use of high-caliber, military-style weapons, has become more common in civilian shootings. These trends should influence how emergency departments prepare for disasters, including an inventory of what critical care medical materials (supplies) are readily available in the event of a disaster.
Aim: To demonstrate the need for the adoption of medical materials planning for disasters to account for new injury patterns from mass shootings.
Methods: A review of injury patterns from recent mass shootings was conducted using available literature (2). The average number of victims presenting to the emergency department in these events was reviewed. Estimation of critical care specific medical materials in the emergency department required for the management of an "average" number of victims with the typical injury pattern of these events was conducted.
Results: Some critical care specific medical materials: intubation equipment, chest tubes, and central venous catheters may be in short supply during a mass shooting event.
Discussion: Emergency physicians must anticipate and prepare for new disaster trends such as mass shootings and high caliber weapons injuries. This includes having specialty medical supplies readily available in sufficient amount. Normal stocking of critical care specific medical materials may be inadequate in a mass shooting event based on the available literature.

References:

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Critical Concepts in Disaster Medicine for Saudi Arabian Emergency Residency Programs: A Delphi Study

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Introduction: Saudi Arabia, the largest country in the Middle East, has suffered numerous terrorist attacks and is the location of Hajj, one of the world's largest annual mass gatherings. Healthcare providers' pre-incident knowledge and understanding of basic disaster medicine (DM) concepts are crucial for a unified and effective health-system response. Introducing healthcare providers to best practices is a stated vision of the Saudi Commission for Health Specialties. Standardizing DM curriculum taught to physicians during their residency training will assist this goal.
Aim: To produce expert consensus on the most critical DM topics for the residency curriculum in emergency medicine (EM) in the Kingdom of Saudi Arabia.
Methods: Utilizing a Delphi approach, a panel of Saudi Arabian experts in DM and EM residency directors were surveyed regarding potential DM topics for EM residency curricula. The first round comprised of open-ended questions seeking lists of suggested DM curriculum topics. In subsequent rounds, each participant received a questionnaire asking them to review the items contributed in the first round, summarized by the investigation team. The participants rated each item on a five-point Likert Scale to establish preliminary priorities and added their comments. In further rounds, participants reviewed and prioritized subjects until they reached a consensus of >=80%.
Results: The study is ongoing and full data will be available in the new year.
Discussion: This expert consensus from major stakeholders can be used to improve the foundation of the DM curriculum. The Delphi Method gives an evidence-based approach to identification and prioritization of subjects, which should be integrated within the Saudi Arabian Emergency Medicine Residency Curriculum. It also can be used as a cornerstone for implementation in other medical education programs across the Kingdom in the future.

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