also ran mobile clinics at the township hospital, the rural healthcare centers, and an orphanage. For the nine operational days, Team Singapore treated a total of 4,710 patients: 62% (2,921) were adults, while 38% were pediatric patients (<12 years old). The most common diagnoses among adults were: Upper respiratory tract infection (URTI) (27.2%); gastritis/gastroenteritis (18.9%); and lower respiratory tract infection (LRTI) (13.8%). The most common diagnoses seen among the pediatric group of patients were: gastritis/gastroenteritis (29.2%); URTI (28.7%); and LRTI (7.5%). Additionally, 6.3% adults came to seek help for long-standing, chronic medical problems (i.e., hypertension and diabetes mellitus). Post-traumatic stress disorder and psychological manifestations were seen in 8.1% of adults and 2.8% of children, while injuries and wounds were treated in 10% and 12% of these groups respectively.

This presentation will share the team's unique experience in the humanitarian response.

Keywords: disaster response; Cyclone Nargis; medical assistance; Myanmar; Team Singapore Prebosp Disast Med 2009;24(2):s145-s146

Use of a Common, Inter-Sectoral Template for Observer Reports of Crises

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Introduction: The use of a common template for observer studies is a way of structuring the experiences gained (lessons observed and learned) from such studies. This facilitates the comparison of reports within one's own field as well as between different sectors. It also facilitates the implementation of joint observer activities and joint observer reports, promoting more comprehensive and holistic learning from the events.

Methods: Using the Utstein method for studying disasters and the Swedish Disaster Medicine study organization (KAMEDO) as an inspiration, a number of Swedish governmental authorities and organizations compiled a template for presenting standardized observer reports. The following titles have been identified to be included: (1) Title; (2) Preface; (3) Observers and Authors; (4) Summary and Experiences; (5) Introduction/Material and Methods; (6) Hazard; (7) Background (including pre-event status and preparedness); (8) Event; (9) Damage; (10) Disturbances; (11) Responses; (12) Recovery and Development; (13) Discussion; (14) References; (15) Appendices; (16) Keywords; (17) Index; and (18) Abbreviations.

Results: This template has been used successfully for observer studies within the health sector (evacuation of Swedes from the war in Lebanon, 2006, a power supply failure at a major university hospital in Stockholm, 2007),

within the food sector (Cryptosporidium contamination of water supply in Ireland, 2007, consequences for water supply from floods in the UK, 2007, sewage contamination of water supply in Finland, 2007) and within crisis management and rescue services sectors (floods in the UK, 2007, sewage contamination of water supply in Finland, 2007, wild fires in California, 2007)

Conclusions: The use of a common, standardized template for the documentation of lessons observed and learned from major disasters/crises has proven useful. In addition to enhancing the completeness and learning value of the reports, it also has proven to be a useful tool for stimulating intra-sectoral cooperation and learning.

Keywords: crisis; disaster; lessons learned; lessons observed;

observer report

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Poster Presentations—Disaster Reports

(C21) Bampoor Flooding: Case Review

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Earthquakes and flooding are two major incidents in Iran. Each year, several storms occur in Sistan-va-Balouchestan state due to the hot and dry climate and the geographical characteristics of the region. Flooding in Bampoor destroyed many homes, but with no human loss. The objective of this study was to analyze crisis management during the Bampoor flooding in January 2008. Up to 125 mm of rain fell in three days, compared to 143 mm in the last 12 months. Being unable to accurately estimate flood risk and magnitude brought catastrophic results. Flood warning notification should be adjusted according to local culture and understanding in order for it to be effective. All decisions should be considered as being effective in all stages of rescue operations. A solution in one phase can change into a serious threat in the next phase, endangering lives. Integrated and focused management in distributing aid is essential to ensure effective aid assignment. Climatological characteristics should be privileged during reconstruction. Psychological support is essential to the empowerment and rehabilitation of victims. Unrealistic promises can put a negative effect on the trust of the affected population. Crisis management skills in Iran must be developed further. Regional and cultural adaptation is recommended to administer relief.

Keywords: Bampoor flooding; disaster; flood; Iran; planning Prehosp Disast Med 2009;24(2):s146

(C22) Reassessment of the Bam Earthquake Five Years Onward

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Background: An earthquake measuring 6.6 Richter in 2003 devastated the historic Iranian city of Bam. During