

Background: AH was organized in March 1995 as a part of Central Airmobile Search-Rescue Team “Tsentspas”, and it has 2 deployment variants. Also created was a system of air medical evacuations including aviation, air medical teams, specialized equipment (intensive care module, telemedicine, transport extracorporeal membrane oxygenation and special setups). Nikiforov Russian Center of Emergency and Radiation Medicine (Saint-Petersburg) is a multi-disciplinary medical-diagnostic, research-education institution within EMERCOM of Russia aimed at providing EMS at the prehospital stage.

Methods: Review the analytical method that was used for this study.

Results: AH can be delivered to emergency areas in air-landing and air-assaulting variants; it can provide EMS in autonomous mode in cases of a difficult access area and harsh climate. World Health Organization (WHO), International Certification Committee classified AH EMERCOM of Russia as FMT type 2 on May 19, 2016. For emergency medical response, EMERCOM has developed and is using an innovative means of personnel delivery and medical evacuation (mobile multifunctional medical-diagnostic unit, amphibious air-cushion craft with removable medical and fire-fighting modules, specialized resuscitation ambulance). Over the last 10 years AH provided EMS in Russia and other foreign countries (Serbia, Afghanistan, Iran, Sri-Lanka, Indonesia, Pakistan, China, Haiti and Chile) including therapy and pediatric care (over 9,000 people), traumatology (over 7,000 people), and surgeries under general anesthesia (over 600).

Conclusion: Both AH deployment variants has shown high efficiency depending on the situation. All possible forms of AH delivery to deployment areas were used. All specialized organic and non-organic formations of EMERCOM of Russia provided efficient EMS at the prehospital stage.

Prehosp Disaster Med 2017;32(Suppl. 1):s102-s103

doi:10.1017/S1049023X17002631

A Consultation-based Study about Core Competencies of Emergency Medical Rescue Strength of the People’s Armed Police

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Study/Objective: To establish an evaluation system regarding the capability of emergency medical rescue strength of the People’s Armed Police (PAP).

Background: Over the past 30 years, various disasters happened in a significantly increasing frequency and intensity, and the tendency will continue in the future. In order to respond effectively to disasters and reduce damage, every country in the world has reinforced the research and practice of emergency medical rescue. As the leading strength to cope with emergency accidents, Chinese People’s Armed Police (PAP) participated in emergency rescue many times to cope with earthquake debris flow, floods, and other disasters. In response, emergency medical rescue detachments were established one-by-one in PAP. Lacking in consistent capability evaluation standards, the

capability of each detachment varies, which greatly influences the global construction pace of emergency rescue forces from PAP.

Methods: In view of the capability and quality of emergency medical rescue strength, the Delphi method was used. All experts from the discipline of emergency management, health service, preventive medicine, clinical medicine, and rescue medicine received the consultation. All experts were qualified Associate Professors or Professors. The consultation involved such items as: appropriateness of indicators setting, comprehensiveness, and overall weight distribution of indicators. After two rounds of consultations, an evaluation system of capability indexes and their corresponding weights were determined.

Results: Through consultations, the evaluation system of capability indexes was formulated including seven first-grade indexes, 16 second-grades, and 42 third-grades. This involves organization and command, emergency maneuvers, injury treatment, medicine support, sorting, medical evacuation, quarantine protection, defense, and survival. Through analysis, it was found that the weight distribution of each index was rational and consistent with practical work.

Conclusion: The establishment of the evaluation system of capability indexes has provided an objective criteria and scientific basis for the construction of emergency medical rescue strength of PAP.

Prehosp Disaster Med 2017;32(Suppl. 1):s103

doi:10.1017/S1049023X17002643

Upgrading the Treatment of Pediatric Trauma in Israel

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Study/Objective: Advertising expert committee recommendations for program improvement and upgrading of child care trauma cases treated in Israeli hospitals in cases of moderate and severe injuries.

Background: Israel established the national trauma care system in the 1990’s. It included a trauma unit at hospitals, the combination of paramedics and intensive care ambulances, the Magen David Adom (MDA EMS), established the National Trauma Registry, constructed and reorganized the emergency medicine departments, Advanced Trauma Life Support (ATLS) courses for doctors, technological improvements significantly in intensive care units, reducing response times and more. These and others led to a reduction in mortality of the severely wounded and those in critical condition. However, children’s injuries are still the leading cause of significant mortality and morbidity of children older than 1-year. Therefore, pediatric trauma is a serious problem of public health and a perceived social and economic burden. Moreover, it causes premature death, disabilities, impaired quality of life, and a burden on society and the victims’ families.

Methods: In Israel, most trauma therapists who are mostly general surgeons have not had enough experience with children. On the other hand, pediatricians have knowledge and experience in child care but not in trauma. This causes the existing gaps in child care, in both a prehospital compound and a hospital.