

出國報告(出國類別：開會)

## 第17屆災難和急救醫學世界聯合會

服務機關：國防醫學院三軍總醫院

姓名職稱：陳穎信 主任、陳玉龍 主治醫師

派赴國家：大陸北京

報告日期：100年6月10日

出國時間：100年5月30日至6月5日

## 會議摘要

世界災難及急救醫學學會(World Association for Disaster and Emergency Medicine, WADEM)成立於西元1976年，其成立宗旨主要在推動及改善到院前及災難發生時緊急救護的品質。該會成員主要來自於急診醫學界的專家，涵蓋領域除了急診醫師之外，還包括緊急救護員、急診護理人員、精神科醫師、社會福利工作者、及公共衛生學專家。希望藉由各領域專家的參與，秉持實証醫學的基本精神，讓不論平時或災難發生時的急難救護品質能獲得更進一步的提升。隨著災難型態的多變，醫療器材及人員素質的提升，學會發展的重點不單單以臨床處置為主，其中很大部分包括災前的訓練及教育，災難發生時的管理系統，以及災後的公共衛生、精神支持等。自學會成立以來，已在世界各地舉辦過多次大型世界及災難研討會(World Congress on Disaster and Emergency Medicine, WCDEM)（約為兩年一次），也是目前針對災難處置的研討會中最具代表性及世界性的。藉由每次世界級的會議，邀集各地專家討論災難處置方面的經驗及研究，進而讓世人在面對下次浩劫來臨前，能多一分準備，少一分傷害。

(第17屆災難和急救醫學世界聯合會)

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## 參加目的

基於特殊的地形及地理位置，生活在台灣的我們時常必須面臨到大小不同的災難。舉凡水災，地震，洪水等等，每次的災害幾乎都造成人民及社會生命財產的重大損失。幾十年來，我國的災難醫療隨著一次又一次慘痛的教訓，有慢慢在改進。目前國內有成立兩個國家級的災難醫療隊，然而，觀察幾次國內災難的救災及救難，不論是災民的搜救，災民的醫療救助，以及現地的整理復原，往往第一線能迅速投入人力的幾乎都是國軍部隊。因此，強化軍醫救災的觀念及能力並負責將災難的相關教育推展到實際的執行單位（包括化學兵部隊，工兵部隊，衛生部隊），身為軍醫的一份子，是應該承擔起這份責任。有幸在各級長官的指導及支持下，本部今年也成立了災難醫學科，其推廣災難醫療的決心更是不言可喻。本著學習取經的心態以及能夠與世界各地災難專家討論經驗的大好機會，本部由災難醫學科陳穎信主任率隊參加這次由世界災難及急救醫學學會(World Association for Disaster and Emergency Medicine, WADEM)舉辦的第17屆災難和急救醫學世界聯合會。

瞭解本次會議的內容，不論是專題演講，或是各場次的議題討論，都相當國際化且深入，尤其是針對近年來各種大型災難的研討，包括最新發生的日本311地震及海嘯，海地地震等。讓我增長不少見識，也證明了一件事：災難的處理不只是紙上談兵，理論講的天花亂墜，都不及實際的去吸取別人慘痛的教訓，並從中獲取值得借鏡之處！

目前國軍在災難醫學方面正積極發展中，我們未來在面臨災難頻傳與更多複合性多變化的大型災難中如何能夠勝任災難醫療救援的角色，將是我們責無旁貸的任務與未來發展，參與國際性災難會議是知己知彼與自我成長與學習別人最好的機會。

## 會議過程

詳如附件：大會節目表，茲僅就當日重要議題列出

May 30, Arrival at Beijing Hotel

May 31, Opening Ceremonies and welcome

Earthquakes

Japan Earthquakes

Disaster Medical Assistance Teams (Civil & Military)

June 1, EMS issues- New Resuscitation Guidelines, an international Perspective

Haiti

The Role of the Military in Humanitarian Relief

Disaster Preparedness: Education

June 2, Reflections of Future Crises and the Challenges for Disaster Medicine

CBRNE

Disaster Management

Triage Discussion

June 3, Strategic Directions in Global Health

EMS - Developments and Training

Closing Ceremony

June 4, Post Congress Course

Guideline for Evaluation and Research in Disaster Management

## 會議心得

世界災難及急救醫學學會(World Association for Disaster and Emergency Medicine, WADEM)與中華醫學會及中華急診醫學會於今年五月底在北京舉辦第17屆災難和急救醫學學術會議暨第14次全國急診醫學學術年會。誠如中華急診醫學會理事長李博士所述，在過去幾年中世界上發生了幾次重大的災害，包括海地地震，汶川大地震，青海玉樹地震，日本大海嘯等等，每次的災害都造成了為數眾多的生命及財產的損失。這次的會議邀集了來自世界各地將近1600位專家學者一起來共襄盛舉，不僅分享最新的經驗與學術交流，藉由這次的大會，各會員間也拉近彼此的距離，讓大家能在面對未來的災難事件時，能一起努力克服。

很榮幸的，這次在各級長官的支持下，能夠參與這次的盛會，獲得增廣見聞的機會。由於會議內容實在太豐富，僅就與本院急診及國防上較相關的課題分享個人經驗。在”日本地震經驗分享”中，來自日本的學者藉由生動的簡報內容，詳實的描述到此次地震及海嘯對日本本土造成的衝擊，以及國家災難醫療隊在當中扮演的角色及運作情形。相較於台灣的醫療隊數量（2個），全日本約有60幾個國家級災難醫療隊在此次投入了救災任務，然而，即使如此，仍有值得檢討之處，包括通訊系統的建立無法在第一時間完整運作，資源分配的不平均等等。這些寶貴的經驗都值得帶回來，檢視我們自己的醫療隊，是否能在下一次災難來臨前或是演習時做驗證。海地經驗也是一個很好的課題，包括外來DMAT的協助，要如何安排才能發揮最大功效，畢竟，災難醫學是災難管理加上醫學治療，沒有好的指揮系統，你有再多的醫療隊，也無法發揮最大的功效。另外，有些關於民間及軍方成立DMAT的話題討論，也頗有幫助，從各國的經驗中瞭解軍方及民間成立DMAT的優缺點，某種程度上與我們的現狀頗有類似之處，希望將這些經驗帶回，對於未來本院的醫療隊能有幫助。其他，還有很多包含災難隊的平時教育及訓練，核生化災難的處置，演習的技巧及要領等等，對於之前就有涉獵相關知識的我們，真的有一種醍醐冠頂的感覺，不只是知識上的擴展，更多的是寶貴經驗的傳承。

台灣急診醫學會蔡理事長此次也親率台灣急診界的菁英參與此次盛會，其中更主持了多項與急診相關的新議題：包括急診暴力事件，急診壅塞問題等，藉由海峽兩岸急診醫師的熱烈討論，再加上國外專家的建議，不但讓與會的我們瞭解到前輩們對於營造急診安全的努力，也從中看到了急診未來的遠景及應規劃的方向。

災難醫療不是一句口號，也不是一種一蹴可踰的學問，它需要的是經驗的傳承及虛心的檢討（檢討每次的失敗及錯誤），慢慢累積出來的。這次的北京行，真的是獲益良多，我衷心感謝醫院給我這個機會見識到世界級的災難醫療，也期盼未來除了有機會貢獻所學之外，能讓這類的國際交流能夠延續下去。

身為三軍總醫院災難醫學科主任，如何將我們醫院未來在災難醫學與救援機制的建立是我的責任，參與這次國際性災難與急診會議讓我更對我們國軍發展災難醫療的重責大任更具信心與更多構想。目前國際在災難醫療的潮流也走向軍民整合機制，如何將軍中與民間在救

，在澳洲的災難醫療團隊中也強調將軍方與民間整合的系統建立能夠更有效處理與效能的發揮，可見未來我們三軍總醫院在災難醫學方的發展要學習別人的長處，整合我們國軍的優勢，這樣才能有更突破性的成長。

## 建議事項

1. 服務方面：積極參與國際以及國內救災事物。災難的處置不是理論，只有到過現場的人，才知道災難來臨時會遇到什麼事，這是一種經驗的累積。鼓勵有心的醫師積極參與相關救災任務，不僅可以增加實務經驗，也可以擴展醫院甚至軍方在災難醫療的影響層面！提高軍醫的聲望。
2. 教學方面：本院目前奉命成立常備災難醫療隊，由各單位醫師及醫事人員組成，並確有班表，按表派隊。但是，針對相關人員的訓練及所需技能卻缺乏完整的教育，希望未來能有機會提供所學及經驗，定期為醫療隊人員做教育訓練，不僅保障人員的安全，也提升了本院醫療隊的品質。
3. 研究方面：隨著經驗的增加，災難醫療服務量的增多，就可以建立相關的資料庫。有很多災難相關的研究題目是可以再深入探討的，因為每次的災難都有其特殊性，地域性。不論處理的結果是好是壞，都有我們值得借鏡之處。
4. 在軍民整合方面：目前三軍總醫院急診醫學部已經組成跨機關的品管圈，主題是建構高山災難醫療救援緊急應變模式，將三軍總醫院，國防醫學院與臺北市搜救隊整合在一起，運用國軍在合歡山武嶺寒訓基地的訓練模式，能夠有突破性在山地與寒地災難醫療的系統整合，更能符合國軍在災難醫療的角色與任務。

## 參加此會議對單位之貢獻

1. 瞭解災難救護隊的運作，協助單位針對本院救護隊進行專業訓練。
2. 研究災難醫學的世界發展現況，經驗傳承。
3. 瞭解災難演習的規劃及訓練，協助單位進行相關模擬訓練。
4. 瞭解世界急診醫學的進展及趨勢，協助單位未來遠景規劃。
5. 目前在參與第17屆災難與急診國際大會後，也將參與這次會議的心得發揮在今年六月18到19日於合歡山武嶺寒訓基地的三軍總醫院高山災難醫療教育訓練體驗活動中，相關新聞報導如下：

<軍聞社記者莊家宏武嶺十八日電>為強化國軍災難醫療救援能力與基礎訓練，適應特殊領域高海拔災難醫療的全方位需求，三軍總醫院今天起一連兩天在合歡山武嶺寒訓基地舉行「高山災難醫療教育訓練體驗活動」，希望能發揮國軍災難醫療救援的特長，整合軍民協同救災機制，建構國家級高山災難醫療隊。

此次「高山災難醫療教育訓練體驗活動」是日前於國防醫學院戰傷暨災難急救訓練中心舉辦的高山災難醫療教育訓練課程的延續，由三軍總醫院災難醫學科主任陳穎信帶隊，召集三總與國防醫學院災難醫療隊任務編組成員、臺北市搜救隊等四十人前往受訓，透過高山實際體驗的活動，分析災難醫療隊員對高山症生理反應，建構高山災難醫療救援隊，達成整合三總、國醫與臺北市消防局搜救隊的軍民協同災難醫療救援合作機制。

今天的訓練內容為「空中救援運輸與高空減壓症」、「高山醫療與高山症研究概論」、「地圖知識與GPS 導航」、「高寒地雪地救援醫療」、「高地繩索垂降之教學與示範」等課程，經由教官分享高山災難醫療經驗，教授學習高山求生與救援技能，使受訓學員瞭解高山災難醫療知識，提昇高地、寒地、雪地與困難地形救援能力。

三總表示，國內外災難事件的頻傳，使得災難醫學與救援的發展更加重要與迫切，為達成在特殊領域方面的救災特色與整合國軍資源，高山災難醫療是一個可以迅速整合國軍目前教育訓練資源、軟硬體設施，有效發展國軍在山地、寒地、雪地與困難地形救災的特長與優勢，未來更將結合航空特戰指揮部武嶺寒訓基地高寒地作戰的教育訓練模式，以及救援直升機支援的空中災難救援系統，發揮國軍災難醫療救援的特長。

## 附件資料

### 活動照片

2011/05/30 大會報到情況（北京國際會議中心門口）



陳穎信主任 口頭報告情景，會後與 Chairman 合影



陳玉龍醫師 海報展示會場



日本 311 地震介紹與討論





17<sup>th</sup> World Congress on Disaster and Emergency Medicine & 14<sup>th</sup> Conference of the Chinese Society for Emergency Medicine  
第17届世界灾难及急救医学学术会议暨第14次全国急诊医学学术年会 11 May - 1 June, 2011 Beijing, China 2011年5月11日-6月1日 中国北京

## CONGRESS PROGRAM

### Monday, 30 May 2011

#### WSI - Pre-Congress Workshop

13:00 - 17:00 **Applying Principles of the National Disaster Life Support Program to Earthquake Response and Management: Incorporating Lessons from Recent Earthquakes into Education and Training** MR 05 (Hall 307)

The four hour workshop will provide a review of the recent earthquakes around the world (Eg. Haiti, Chile, China, and New Zealand) and will include describe the medical and public health consequences using the DISASTER Paradigm as a teaching tool. The workshop will also include an earthquake simulation exercise which allow attendees to apply National Disaster Life Support principles to respond to an earthquake. The workshop will also discuss the global advances in the National Disaster Life Support Training Program.

Objectives 1: The attendee will be able to discuss the medical and public health consequences of Earthquakes

Objective 2: The attendee will be able to describe the DISASTER Paradigm

Objective 3: The attendee will be able to apply the DISASTER Paradigm to a simulated earthquake exercise and drill

#### Faculty:

Italo Subbaro DO, MBA

Raymond Swienton MD, FACEP

Philip Coule MD, FACEP

Jack A. Horner

Richard Schwartz MD, FACEP

James J. James MD, DrPH, MHA



## Tuesday, 31 May 2011

PL01

09:00 - 10:15 Opening Ceremonies and Welcome

Main Hall (Hall 1)

### Welcoming Addresses by

Dr. Demetrios G. Pyrras, President, WADEM

Dr. Chen Zhu, Minister, Ministry of Health of the People's Republic of China

Dr. Michael O'Leary, World Health Organization Representative for China

Dr. Liang Wannian, Director of Office for Emergency Response

Prof. Li Chunsheng, President, Chinese Society for Emergency Medicine

Judith Fisher, Chair Scientific Committee

PL02

11:00 - 12:30 Earthquakes

Main Hall (Hall 1)

Chair: L. Swircher, Vancouver/CA

11:00 - 11:45

PLE-01 - The Sichuan Injury Study

D. Guha-Sapir, Brussels/BE



### Biography

Debarati Guha-Sapir, was born India and is currently full professor at the Université Catholique de Louvain. She studied epidemiology in Johns Hopkins University and Université Catholique de Louvain, from where she got her doctorate degree. Since early 1990s, she directs the Centre for Research on the Epidemiology of Disasters specialized in the epidemiology of natural disasters and civil conflicts. Her research is largely field based - undertaking studies in disaster prone areas of Asia, Africa and Latin America. Her work has been a mix of academic publishing and policy and field support. She founded the now international reference disaster data EMDAT and is currently setting up a similar global system for data from civil conflicts (ICEDAT). She is actively engaged with policy makers in the UK and US governments as well UN and EU institutions as well as bilateral governments such as UK, US Governments of Indonesia and India among others. She is a member of the Académie Royale de Médecine de Belgique.

11:45 - 12:00

PLE-02 - Sino British Medical Cooperation Following the Sichuan Quake

A. Redmond, Manchester/UK

12:00 - 12:15

PLE-03 - Disaster risk and impact perception among Rural Population Living in Remote Disaster-prone Area in Gansu Province, China

E. Chan<sup>1</sup>, E. Cheung<sup>1</sup>, K. K. Cheuk<sup>2</sup>, P. Lee<sup>1</sup>, C. L. Y. Lin<sup>1</sup>, E. Holroyd<sup>3</sup>, <sup>1</sup>NH/HK, <sup>2</sup>Oxford/UK, <sup>3</sup>Shatin/HK, <sup>4</sup>Buridoola/AU

12:15 - 12:30

Discussion



BR01

13:45 - 15:15 Earthquakes

MR 01 (Hall 201)

Chair: A. Redmond, Manchester/UK

13:45 - 14:00 A-0001 - The May 12, 2008 Wenchuan Earthquake: A Primer on China's Emergency Responses and Recovery Planning

L. Svirchev<sup>1</sup>, Y. Li<sup>2</sup>, L. Yan<sup>3</sup>, C. He<sup>4</sup>, M. B. Lin<sup>3</sup>; <sup>1</sup>Victoria, BC/CA, <sup>2</sup>Vancouver, BC/CA, <sup>3</sup>Chengdu/CN, <sup>4</sup>Vancouver/CA

14:00 - 14:15 A-0002 - Strategies to Recover the Health Care Capacity Post Earthquake in Chile

C. Bambaren, 33/PE

14:15 - 14:30 A-0003 - Health care facilities affected by the Earthquake in Chile

C. Bambaren, 33/PE

14:30 - 14:45 A-0004 - Emergency Health Interventions in Earthquakes: Red Cross Experience from Haiti and Chile, 2010

P. SAARISTO, T. ALOUDAT; Geneva 19/CH

14:45 - 15:15 Discussion

Core Surgical team: Orthopedic  
Plastic  
A&E.

TRM的觀念,

Disaster preparedness  
epidemiology





3F

BR02

13:45 - 15:15

**Overwhelmed: Developing crisis standards of care for catastrophic emergencies**

MR 02 (Hall 3)

Chair: M. Keim, GA/US

When a nation or region prepares for public health emergencies such as a pandemic influenza, an earthquake, or any disaster scenario in which the health system may be stressed to its limits, it is important to describe how standards of care would change due to shortage of critical resources. "Crisis standards of care" is defined as a substantial change in usual healthcare operations and the level of care it is possible to deliver, which is made necessary by a pervasive (e.g., pandemic influenza) or catastrophic (e.g., earthquake, hurricane) disaster. To ensure that the utmost care possible is provided to patients in a catastrophic event, nations/regions need a robust system to guide the public, healthcare professionals and institutions, and governmental entities at all levels. Building off the work of the United States Institute of Medicine, Guidance for Establishing Crisis Standards of Care for Use in Disaster Situations, this session focus on opportunities and challenges to integrate crisis standards of care principles into international disaster response plans.

**Learning Objectives:**

- Discuss the challenges of providing fair and equitable care in mass casualty incidents
- Discuss a potential framework for the equitable delivery of care in situations of scarce resources and strategies for operationalizing crisis standards of care in austere environments
- Examine strategies for integrating crisis standards of care principles into disaster response plans
- Highlight the impact of international disaster response on changing the standard of care in the host country

13:45 - 13:50

**14 - INTRODUCTION**

M. Keim, GA/US

13:50 - 14:10

**A-0005 - A Model for Equitable Delivery of Care in Situations of Scarce Resources**

D. Hanfling, Falls Church/US

14:10 - 14:20

**Discussion**

14:20 - 14:40

**A-0006 - Providing Austere Care in Mass Casualty Incidents: Experiences from China**

Z.-J. Feng, China

14:40 - 14:45

**Discussion**

✓ 14:45 - 15:05

**A-0007 - Operationalizing Crisis Standards of Care: The Japanese Experience**

Y. Haraguchi



~~BR03~~

~~13:45 - 15:15~~

**Urban Search and Rescue**

MR 03 (Hall 2A)

Chair: P. Ortenwal, /SE

13:45 - 14:30

**A-0008 - Urban Search and Rescue**

G. Seynaeve, Brussel/BE

14:30 - 14:40

**A-0009 - Search and Rescue Underestimated**

M. Gruskin, Gainesville, FL/US

14:40 - 14:50

**A-0010 - Animal Search and Rescue**

D. Green, Yarmouth Port, MA/US

14:50 - 15:15

**Discussion**

~~BR04~~

~~13:45 - 15:15~~

**Psychosocial**

MR 04 (Hall 2B)

Chair: J. M. Shultz, Miami, FL/US

13:45 - 13:55

**A-0011 - Beyond Illness and Trauma: A Study of the Interface between Disaster Mental Health and Recovery**

J. Joseph, S. Jaswal, A. Srikanth; 022/IN

13:55 - 14:05

**A-0012 - From a helpless victim to a coping survivor: Innovative mental health intervention methods during emergencies and disasters**

M. Farchi, Upper Galilee/IL

14:05 - 14:15

**A-0013 - Effective Proactive Outreach among Disaster Relief Workers (DRW) in an Emergency Mortuary (EM)**

E. DHONDT, A. HEULOT; Brussels/BE

14:15 - 14:25

**A-0014 - Psychosocial support services in disasters - Indian Experiences**

K. Sekar, Bangalore/IN

14:25 - 14:35

**A-0015 - Trauma Signature Analysis: Evidence-Based Guidance for Disaster Mental Health Response**

J. Shultz<sup>1</sup>, Y. Neria<sup>2</sup>, Z. Espinet<sup>1</sup>, F. Kelly<sup>3</sup>; <sup>1</sup>Miami, FL/US, <sup>2</sup>New York City, NY/US, <sup>3</sup>Dublin/IE

14:35 - 15:15

**Discussion**





BR05

13:45 - 15:15 Trauma and Emergency Medicine

MR 05 (Hall 307)

Chair: P. Hargrave

CB0025

- 13:45 - 13:55 A-0016 - Using Geographical Information systems in Road Traffic Injury Research: A case study of New Mumbai, India  
A. Srikanth, B. Guru; Mumbai/IN
- 13:55 - 14:05 A-0017 - Epidemiology of Non-vehicular Trauma Patients in the Prehospital Setting in India  
N. Lodhia<sup>1</sup>, M. Strehlow<sup>1</sup>, E. Pirrotta<sup>1</sup>, B. N. V. Swathi<sup>2</sup>, A. Girkala<sup>2</sup>, S. Sistla<sup>2</sup>, R. Rao<sup>2</sup>, S. Mahadevan<sup>1</sup>; <sup>1</sup>Stanford, CA/US, <sup>2</sup>Secunderabad/IN
- 14:05 - 14:15 A-0018 - The Influence of Status and The Patterns Of Driving License Ownership Toward The Gradation of Open Fractures According to Sardjito Scoring System Suffered By Motorcycles Accident Patients In Emergency Department of Saiful Anwar General Hospital From April To June 2010  
T. Maharani<sup>1</sup>, A. Haedar<sup>2</sup>; <sup>1</sup>Kediri/ID, <sup>2</sup>Malang/ID
- 14:15 - 14:25 A-0019 - Establishing a Trauma Registry at the National Referral Hospital in Thimpu, Bhutan  
T. Nelp<sup>1</sup>, N. Manice<sup>2</sup>, S. Morris<sup>3</sup>; <sup>1</sup>Washington Dc/US, <sup>2</sup>Washington, Dc/US, <sup>3</sup>Boston, MA/US
- 14:25 - 14:35 A-0020 - Injury Pattern and Disaster Plan for Landmines and Improvised Explosive Device Blast  
S. CHOUDHARY, New Delhi/IN
- 14:35 - 14:45 A-0021 - Injury Patterns of Blast Type Antipersonnel Land Mine Victims  
A. Karunaratne, L. Dassanayake, D. Munidasa; Anuradhapura/LK
- 14:45 - 14:55 A-0022 - Impact of Karachi Terrorist Bombing on an Emergency Department of a Tertiary Care Hospital  
H. Waseem, S. Shahbaz, J. Razzak; Karachi/PK
- 14:55 - 15:15 Discussion

CB0025



BR06

13:45 - 15:15

Education Training

Chair: M. Schneider, /DE

MR 06 (Hall 305 AB)

3F

13:45 - 14:05

A-0023 - Mass Casualty Incident and terrorist attack preparedness of German hospitals and physicians compared to Austria, Switzerland, the USA and a worldwide collective

P. Fischer<sup>1</sup>, C. Nitsche<sup>1</sup>, K. Kabir<sup>2</sup>, A. Wafaisade<sup>3</sup>, S. Müller<sup>2</sup>, M. Rohner<sup>2</sup>, T. Kees<sup>4</sup>; <sup>1</sup>University Clinic, Bonn/DE, <sup>2</sup>University Hospital Bonn, Bonn

14:05 - 14:15

A-0024 - An disaster education framework to bridge natural disaster medical response and primary care development in developing countries

E. Chan<sup>1</sup>, S. Wong<sup>2</sup>, S. Griffiths<sup>2</sup>, C. Graham<sup>2</sup>; <sup>1</sup>Nt/HK, <sup>2</sup>Hong Kong/HK

*Emily Chan*

14:15 - 14:25

A-0025 - Does Community Emergency Care initiative improves the knowledge, skill and attitude of healthcare workers and laypersons in basic emergency care in India?

S. Bhoi, N. Thakur, S. Chauhan, R. Kumar, D. Aggarwal, V. Gulati, C. Sawhney; 110029/IN

14:25 - 14:35

A-0027 - Traumatic Wound Management by Bystanders - Myths

V. Raju, Hyderabad/IN

14:35 - 14:45

A-0028 - A Matter of Degree: Teaching "Disaster" and "Emergencies" to Public Safety Executives

J. Carroll, Pembroke Pines/US

14:45 - 14:55

A-0029 - Effect of Institutional Education and Exercise Programs on Knowledge, Views, and Compliance during Unusual Biological Events

O. Benin-Goren, E. Miller, I. Dallal, J. Abu Hanna; Tel Aviv/IL

14:55 - 15:15

Discussion

CB0025



BR08

13:45 - 15:15

Civil Military

Chair: K. Sundnes, /NO

MR 08 (Hall 308)

13:45 - 13:55 A-0038 - Global Health Cluster Position Paper

13:55 - 14:05 A-0039 - Civil-military collaboration in trauma training

L. Lundberg, P. Ortenwall; Västra Frölunda/SE

14:05 - 14:15

A-0040 - Military and Civilians in Australian Disaster Medical Assistance Teams

A. Robertson, T. Weeramanthri; East Perth, WA/AU

14:15 - 14:25

A-0041 - Perceptions of Military Medical Disaster Training

D. Higgins, San Antonio, TX/US

14:25 - 14:35

A-0042 - Development of Slovene Military Medical Unit

A. Strahovnik, Celje/SI

14:35 - 14:45

A-0043 - Are Injuries due to Terrorism and War Similar? A Comparison of Civilians and Soldiers

K. Peleg, Ramat Gan/IL

14:45 - 15:15

Discussion

BR09

13:45 - 15:15

Credentialing and Accreditation Panel

Chair: M. Birnbaum, Madison, WI/US

MR 09 (Hall 311)

A discussion between a selection of academics from around the world on Credentialing and Accreditation

CB0025



BR11

16:00 - 17:30 **Japan Earthquake 2011**

MR 01 (Hall 201)

Chair: T. Ukai/JP

16:00 - 17:20

**Eastern Japan Triple Disaster: Earthquake, Tsunami, and Nuclear – urgent report**

On March 11, eastern part of Japan was hit by the triple disaster, earthquake of magnitude 9.0 in Richter scale, tsunami of 15 meters high, and Fukushima nuclear power plant failure. Death toll of 14, 728 was ascertained and more than 10, 000 are still missing as of May 3.

Immediately after the disaster, waiting order was issued to all the DMAT members. Early next morning more than 200 DMAT teams were deployed in disaster areas. Many search and rescue teams from police department, Fire department and Japan self Defense Forces were deployed to which S&R teams from many foreign teams joined. In add to the extraordinary big natural disasters, Fukushima nuclear power plant failure made the matter worse and complicated.

Medical response from emergency phase to sub-acute phase of this disaster will be reported by four doctors and discussed as the urgent report session.

**Panelists**

Dr. Masafumi Nishizawa, Dept. Internal Medicine, Shizugawa Public Hospital

Dr. Shinichi Nakayama, Hyogo Emergency Medical Center

Dr. Kazuma Morino, Dept. Emergency Medicine, Yamagata University Hospital

Dr. Hisayoshi Kondo, National Tokyo Disaster Medical Center

300+ DMAT

Slide Good

17:20 - 17:30

**A-0084a - The importance of interagency communications in the tsunami disaster stricken area in the 2011 East Japan Great Earthquake**

M. Ogasawara, K. Ito, K. Saito; Aomori-ken/JP

17:20 - 17:30

**Discussion**

CB0025





Wednesday, 1 June 2011

PL03

09:00 - 09:45 EMS Issues - New Resuscitation Guidelines, an International Perspective Main Hall (Hall 1)

Chair: J. Fisher, UK

09:00 - 09:45 PLE-04 - EMS Issues - New Resuscitation Guidelines, an International Perspective

A. Barelli, Rome/IT

#### Abstract

Alessandro Barelli, Roberta Barelli, Camilla Naso\*

Department of Anaesthesiology, Emergency Medicine

Catholic University School of Medicine, Rome, Italy

Accident & Emergency, Monterotondo Hospital, Rome, Italy\*

The simultaneous publication of European Resuscitation Council (ERC) and American Heart Association (AHA) Guidelines for cardiopulmonary resuscitation (CPR) updates those published in 2005.<sup>1</sup>

Like the 2005 guidelines, these 2010 guidelines are based on the most recent International Consensus on CPR Science with Treatment Recommendations [CoSTR],<sup>2</sup> which are the results of systematic reviews of all available evidences relating to CPR.

This abstract provides the essentials of the main guideline changes since 2005.

Without CPR survival rate after cardiac arrest (CA) decreases by 7-10% per minute. Therefore instant and correct bystander CPR is crucial to establish a successful chain of survival. As in the past, 2010 CPR recommendations have been challenged with evidence based data to improve CPR quality.

The 2010 guidelines are characterized by a strategy of simplification of recommendations and steps of action.

The key message within BLS consists of "compression first". Rescuers should begin CPR if the victim is unresponsive and not breathing (ignoring occasional gasps). Gasping should not prevent initiation of CPR.

Untrained rescuers will be instructed by EMS dispatcher's phone instruction. The new guidelines also line out the importance of team work and cooperation, as CPR mainly is performed by multiple rescuers and fatigue in CPR effectiveness is a problem with regard to outcome quality of life after ROSC.

Of all treatment steps in cardiac arrest, only high quality chest compression with minimal interruption, if possible in combination with ventilation and early defibrillation (if indicated) are Class 1 recommendations.

The 2010 guidelines of ERC and AHA are based on the same raw material (ILCOR CoSTR). The presentation of the content is different in some aspects and the content was slightly modified taking into account "geographic, economic and system differences in practice, availability of devices and drugs and training".

These slight differences cannot affect prognosis after cardiac arrest while rescuers' training, education and refreshing remain the real key factors to assure a better survival.

1. Nolan J. European Resuscitation Council Guidelines for resuscitation 2005. Section 1. Introduction. Resuscitation 2005;67(Suppl. 1):S3-6.
2. Nolan JP, Hazinski MF, Billi JE, et al. International Consensus on Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science with Treatment Recommendations. Part 1. Executive Summary. Resuscitation 2010; 81:1219-1276





PL04

09:45 - 10:15 Gate Keeping in Out of hospital Care

Main Hall (Hall 1)

Chair: J. Fisher, UK

09:45 - 10:15 PLE-05 - Gate Keeping in Out of Hospital Care

J. Overton, Salt Lake City/US

PL05

11:00 - 12:30 Haiti

Main Hall (Hall 1)

Chair: C. de Ville de Goyet, /BE

11:00 - 11:10 PLE-06 - Médecins Sans Frontières Surgical Response to the 2010 Haiti Earthquake

A. Ronnse<sup>1</sup>, P. McMaster<sup>2</sup>, P. Herard<sup>3</sup>, C. Devecchis<sup>4</sup>, J. von Schreeb<sup>5</sup>; <sup>1</sup>Brussels/BE, <sup>2</sup>Amsterdam/NL, <sup>3</sup>Paris/FR, <sup>4</sup>Barcelona/ES, <sup>5</sup>Stockholm/SE

11:10 - 11:20 PLE-07 - Implementing an Animal and Attitudinal Survey in Port-au-Prince

D. Green, Yarmouth Port, MA/US

11:20 - 11:30 PLE-09 - US Medical Response to the Earthquake in Haiti: Lessons Learned

S. Briggs, L. C. Chang; Boston, MA/US

11:30 - 11:40 PLE-10 - Response to a Faraway Disaster: Lessons Learned from an Israeli Field Hospital Deployment in Haiti

Y. Kreiss<sup>1</sup>, A. Bar<sup>2</sup>, O. Merin<sup>3</sup>, K. Peleg<sup>4</sup>, G. Levy<sup>1</sup>, S. Vinker<sup>1</sup>, R. Sagi<sup>1</sup>, A. Abargel<sup>1</sup>, C. Bartal<sup>5</sup>, G. Lin<sup>6</sup>, E. Bar-On<sup>7</sup>, M. Schwaber<sup>1</sup>, N. Ash<sup>1</sup>; <sup>1</sup>Medical Corps, Israel Defence Force/IL, <sup>2</sup>Home Front Command, And Israel Defense Forces Medical Corps Surgeon General/IL, <sup>3</sup>Shaare Zedek Medical Center, Hebrew University, Jerusalem/IL, <sup>4</sup>Ramat Gan/IL, <sup>5</sup>Soroka University Medical Center And Ben-gurion University Of The Negev, Beer-sheva/IL, <sup>6</sup>The Western Galilee Hospital, Nahariya/IL, <sup>7</sup>Schneider Children's Medical Center, Petah Tikva, Israel/IL

11:40 - 11:50 PLE-11 - Who were they and what did they do? Assessment of Foreign Field Hospitals in Haiti

M. Gerdin, A. Wladis, J. von Schreeb; Stockholm/SE

11:50 - 12:00 PLE-12 - Access to Water, Sanitation and Hygiene in Internally Displaced Persons Settlements in Port-au-Prince, Haiti at 5 months Post-Earthquake

D. Morof<sup>1</sup>, M. Schneider<sup>2</sup>, J. Ratto<sup>1</sup>, C. Blanton<sup>1</sup>, T. Handzel<sup>1</sup>; <sup>1</sup>Atlanta/GE, <sup>2</sup>Washington Dc/US

12:00 - 12:10 PLE-13 - Haiti Experience as an Example of Recent International Humanitarian Activities Conducted by Ministry of Health of Turkish Republic

A. COSKUN, F. INAN, S. TEKELI YESIL, M. DEMIRKASIMOVLU, M. GÜLEÇ, S. ATASOY; Ankara/TR

12:10 - 12:30 Discussion



BR25

13:45 - 15:15 **Disaster Preparedness: Education**

MR 05 (Hall 307)

Chair: D. Morof, Atlanta/GE

- 13:45 - 13:55 **A-0109 - Health Workforce and disaster preparedness of rural hospitals**  
L. Siegloff<sup>1</sup>, L. Cusack<sup>2</sup>, P. Arbon<sup>2</sup>, A. Hutton<sup>2</sup>, L. Mayner<sup>2</sup>, <sup>1</sup>Adelaide, SA/AU, <sup>2</sup>Adelaide, SA/AU
- 13:55 - 14:05 **A-0110 - A Survey of Health Professions Students Attitudes Towards and Knowledge of Emergency Preparedness**  
D. Markenson, M. Reilly; New York, NY/US
- 14:05 - 14:15 **A-0111 - Role, Resources, and Clinical and Educational Backgrounds of Nurses who Participated in the Prehospital Response to the 2009 Bushfires in Victoria, Australia**  
J. Ranse<sup>1</sup>, S. Lenson<sup>2</sup>; <sup>1</sup>Canberra, ACT/AU, <sup>2</sup>Canberra/AU
- 14:15 - 14:25 **A-0112 - Development of Model Medical Care Protocols for Alternate Care Sites during Pandemics and Public Health Emergencies**  
D. Markenson, M. Reilly; New York, NY/US
- 14:25 - 14:35 **A-0113 - Ethics in the delivery of humanitarian health response: Learning from the narratives of health care workers**  
L. Redwood-Campbell<sup>1</sup>, M. Hunt<sup>2</sup>, L. Schwartz<sup>1</sup>, C. Sinding<sup>1</sup>, L. Elit<sup>1</sup>, S. De Laat<sup>1</sup>, J. Ranford<sup>1</sup>; <sup>1</sup>Hamilton/CA, <sup>2</sup>Montreal/CA
- 14:35 - 14:45 **A-0114 - Disaster medical services system in Hyogo prefecture from the lessons of the Great Hanshin-Awaji Earthquake**  
S. Nakayama, S. Kozawa, T. Ukai; Kobe/JP
- 14:45 - 14:55 **A-0115 - Disaster Preparedness and Learning Habits of the German Security and Rescue Forces: a Survey**  
P. Fischer<sup>1</sup>, J. Christian<sup>1</sup>, A. Wafaisade<sup>1</sup>, T. Kees<sup>1</sup>, K. Kabir<sup>1</sup>, M. Müller<sup>2</sup>, M. Rohner<sup>1</sup>, S. Müller<sup>1</sup>, B. Schneider<sup>3</sup>; <sup>1</sup>Bonn/DE, <sup>2</sup>Göttingen/DE, <sup>3</sup>Tuebingen/DE
- 14:55 - 15:05 **A-0116 - Emergency Medical Education Design**  
L. Chuanzhu, China
- 15:05 - 15:15 **Discussion**



BR32

16:00 - 17:30

**Editor's Summit**

Chair: D. Bradt, /M/

MR 02 (Hall 3)

MR 03

HALL  
311

**Panel Discussion**

A-0148 - American Journal of Disaster Medicine

S. Briggs, Boston/US

A-0149 - AMA Journal of Disaster Medicine and Public Health Preparedness

I. Subbarao, Chicago/US

A-0150 - Pre-Hospital and Disaster Medicine

M. Birnbaum, Madison/US

A-0150a - Journal of Emergency Medicine (BMA)

D. Walter, Manchester/UK

BR33

16:00 - 17:30

**Resuscitation: Cardiac and Stroke**

Chair: L. Mayner, Adelaide, SA/AU

MR 03 (Hall 2A)

16:00 - 16:10

**A-0151 - Non-Traumatic Out-of-Hospital Arrests: Initial Cardiac Arrhythmia, Circadian Differences and Cause of Death**

V. Alicia, C. Yih Chong Michael, S. Eillyne; Singapore/SG

16:10 - 16:20

**A-0152 - Comparison Of Load Distributing Band And Standard Cardiopulmonary Resuscitation In Patients Presenting With Cardiac Arrest To Emergency Department**

M. Ong, P. Sultana, S. Fook-Chong, A. Annitha, S. H. Ang, L. Tiah, K. L. Yong; Singapore/SG

16:20 - 16:30

**A-0153 - Analysis of Chest Compressions: Measured Using the Quality Compression Index and Performance Disparities Among Demographic Characteristics**

J. Schwab<sup>1</sup>, A. Williams<sup>1</sup>, M. Birnbaum<sup>1</sup>, Z. Emberts<sup>2</sup>, P. Padien<sup>3</sup>, A. Bhattacharya<sup>1</sup>, S. Olson<sup>1</sup>; <sup>1</sup>Madison/US, <sup>2</sup>Minneapolis, MN/US, <sup>3</sup>Oshkosh/US

16:30 - 16:40

**A-0154 - A comprehensive thrombolysis service for patients with acute ischemic stroke administered prehospital and in an emergency department in northern Taiwan**

Y. Chen<sup>1</sup>, C. Chen<sup>1</sup>, C. Chiang<sup>1</sup>, G. Peng<sup>1</sup>, R. Tzeng<sup>1</sup>, H. Huang<sup>1</sup>, C. Huang<sup>1</sup>, W. Wu<sup>1</sup>, K. Hsiung<sup>1</sup>, H. Liu<sup>2</sup>; <sup>1</sup>Taipei City/TW, <sup>2</sup>New Taipei City/TW

16:40 - 16:50

**A-0155 - Acute Myocardial Infarction with Upper Gastrointestinal Bleeding.**

S. TANDON, P. Bordoloi, T. KOLE; New Delhi/IN

16:50 - 17:30

**Discussion**



Thursday, 2 June 2011

PL06

09:00 - 09:45

Reflections on Future Crises and the Challenges for Disaster Medicine

Main Hall (Hall 1)

Chair: M. Birnbaum, Madison/US

09:00 - 09:10

Chairman's Introduction

09:10 - 10:00

PLE-13 - Reflections on Future Crises and the Challenges for Disaster Medicine

F. Burkle, Ma/US



#### Biography

Professor Burkle is a Senior Fellow and Scientist with the Harvard Humanitarian Initiative, Harvard School of Public Health; Senior International Public Policy Scholar at the Woodrow Wilson Center for International Scholars in Washington DC; and Senior Associate Faculty, Department of International Health and the Center for Refugee & Disaster Response, Johns Hopkins University Medical Institutes. In 2007 he was elected to the prestigious Institute of Medicine of the National Academy of Sciences and received the William Crawford Gorgas "Yellow Fever" Medal for "distinguished work in preventive medicine, groundbreaking work in disaster management and humanitarian assistance and the training of an entire generation of United States and international personnel." Dr. Burkle has worked in and consulted on numerous wars, conflicts, humanitarian public health emergencies, and large-scale international disasters in Asia, Africa, the Middle East, and Eastern Europe for major NGOs, the Red Cross Movement, World Health Organization, and the military. He founded and directed the Center of Excellence in Disaster Medicine & Humanitarian Assistance a WHO Collaborating Center for Civil-Military Operations from 1993 to 2000. He served as Deputy Assistant Administrator for the Bureau of Global Health at United States Agency for International Development, United States Department of State and as the Senior Medical Officer on the Disaster Assistance Response Team and as Interim Minister of Health in Iraq. He holds degrees from Saint Michael's College, the University of Vermont College of Medicine, Yale University, Harvard University, the University of California at Berkeley, and Dartmouth College. He is qualified in Emergency Medicine, Pediatrics, Pediatric Emergency Medicine, Psychiatry, holds a Master's Degree in Public Health, Diploma in Tropical Medicine from the Royal College of Surgeons in Dublin, Ireland and a Diploma in Health Emergencies in Large Populations from the University of Geneva, Switzerland. He published over 190 peer reviewed articles, abstracts, and book chapters and 4 books, 3 on disaster medicine. He is a retired Combat decorated Naval Reserve Captain, who served with the Marines in Viet Nam, Somalia, the Persian Gulf War, and Iraq. He is a member of the Board of Directors of the International Rescue Committee, a member of the Science Advisory Board of the American Red Cross and served as the elected Chair of the American Medical Association's National Disaster Life Support Consortium for the last 4 years.

#### Abstract

After more than three decades of preoccupation with wars and internal political conflicts, the humanitarian community has the opportunity to re-evaluate what humanitarian crises will dominate both policy and practice in the future. These crises share the common thread of being major public health emergencies which requires new approaches, including unprecedented improvements and alterations in education, training, research, strategic planning, and policy and treaty agendas. All these issues place increasing burden on disaster medicine as a multidisciplinary discipline. Challenges to disaster medicine will be discussed in detail along with recommendations for the future.



BR42

13:45 - 15:15

CBRNE

MR 02 (Hall 3)

Chair: A. Ziegler (A)

- 13:45 - 13:55 A-0204 - Importance of Emergency Response Program Organizations in Coping with the Increasing Risk of CBRN Events  
M. Ranghieri, M. Guidotti, A. Rossodivita; Milan/IT
- 13:55 - 14:05 A-0205 - Management of Mass Casualties and Associated Health Effects following Chemical or Radiological agent release: Results of the European Union MASH study, 2008-2010.  
D. Baker, London/UK
- 14:05 - 14:15 A-0206 - Simulation of an Emergency Situation Caused by Biochemical Incident  
P. Čech<sup>1</sup>, V. Bures<sup>1</sup>, T. Otčenásková<sup>2</sup>, K. Antoš<sup>2</sup>, J. Vaněk<sup>1</sup>; <sup>1</sup>Brno/CZ, <sup>2</sup>Hradec Králové/CZ
- 14:15 - 14:25 A-0207 - Resuscitation of Casualties following Exposure to Toxic Chemicals: What is New?  
D. Baker, London/UK
- 14:25 - 14:35 A-0208 - The Management of HazMat Incident in Hong Kong  
C.T. Shing, China
- 14:35 - 14:45 A-0209 - Developing Medical Facility Preparedness for Radiological HazMat Emergencies: Applying Surge Science  
H. C. S. Lim, A. Cheong, Y. L. Cai; Singapore/SG
- 14:45 - 14:55 A-0210 - Chemical Sensor Trial for Nerve Agent Differentiation: Impact of Hydrogen Bonds on Detection  
A. Öztuna, H. Nazir; Ankara/TR
- 14:55 - 15:05 A-0211 - Nanosciences and CBRN Threats: Considerations About the Potential Risk of Illicit Use of Nanosystems  
A. Rossodivita, M. Guidotti, M. Ranghieri; Milan/IT
- 15:05 - 15:15 Discussion



BR50

13:45 - 15:15 French Session: Emergency Medicine

MR 10 (Hall 2C)

Chair: J. Pitteloud, F. Lévy, S. Sion, CHU, Mulhouse/FR

13:45 - 14:00 Introduction

14:00 - 14:15 A-0245 - Le secours à personnes, de la difficulté d'une doctrine unique  
J. Bassetti, Narbonne/FR

14:15 - 14:30 A-0246 - Secourisme aux permis de conduire: quel programme retenir ?  
P. LAUWICK, Paris/FR

14:30 - 14:45 A-0247 - infirmier pompier  
J. IACINO, Serres Ste Marie/FR

14:45 - 15:00 A-0248 - Médecin en zone d'exclusion lors d'un accident chimique  
L. Ronchi, C. Decanlers; Nogent Le Rotrou/FR

15:00 - 15:15 Discussion

BR51

16:00 - 17:30 Foreign Medical Teams after disasters

MR 01 (Hall 201)

Chair: A. Redmond, Manchester/UK

16:00 - 16:20 A-0249 - Triage and levels of care  
P. Halpern, Tel Aviv/IL

16:20 - 16:40 A-0250 - Should field medical teams cooperate?  
P. McMaster, Amsterdam/NL

16:40 - 17:30 Discussion



## Friday, 3 June 2011

PL09

09:00 - 10:15 **Strategic Directions in Global Health**

Main Hall (Hall 1)

Chair: P. Arbon, /SE

CB0025

09:00 - 10:15 **Presentation by the World Health Organization**

PL10

11:00 - 12:00 **Veterinary Keynote Speaker**

Main Hall (Hall 1)

Chair: G. V. Vroegindewey, M. Salman; College Park, Maryland/US, 1466/US

11:00 - 11:15 **PLE-16 - OIE (The World Organization for Animal Health) roles in Global health**  
I. Shimohira, Tokyo/JP

11:15 - 11:30 **PLE-17 - Global Infectious Animal Diseases and their impact on food security**  
M. Salman, 1466/US

11:30 - 11:45 **PLE-18 - One Health: Veterinarians' Roles during Disasters**  
G. Vroegindewey, College Park, Maryland/US

11:45 - 12:00 **Discussion**

PL11

12:00 - 12:30 **A Framework for Understanding Disasters**

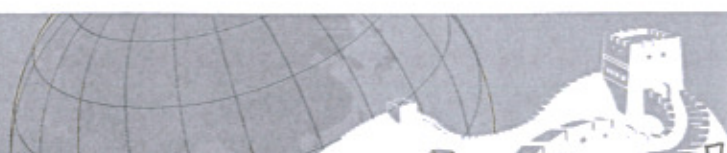
Main Hall (Hall 1)

Chair: P. Kulling, /SE

12:00 - 12:30 **PLE-19 - A Framework for Understanding Disasters**

A. O'Rourke, Madison/US

CB0025





BR66

**13:45 - 16:30 Disaster Management: Field Hospitals/Communications**

**MR 06 (Hall 305 AB)**

*Chair: T. Ukai/Japan*

- 13:45 - 13:55 **A-0331 - Simulation of Mobile Hospital Team for Mass Gathering and Mass Casualty in Iraq : Korean Experience**  
S. J. Wang, Seoul/KR
- 13:55 - 14:05 **A-0332 - Increasing Medical Situational Awareness and Interoperability via "Virtual USA"**  
K. Andress, Shreveport, LA/US
- 14:05 - 14:15 **A-0333 - The Potential Use of Social Media in Animal Emergency Response**  
H. Case, Schaumburg/US
- 14:15 - 14:25 **A-0334 - Disaster Medicine Center Evolution (Structure and Activities)**  
G. Kipor, S. Goncharov, L. Borisenko, B. Bobi, N. Pichugina; Moscow/RU
- 14:25 - 14:35 **A-0335 - Emergent Use of Social Media: A New Age of Opportunity for Disaster Resilience**  
M. Keim, 30303, GA/US
- 14:35 - 14:45 **A-0336 - Sustaining Telecommunications Capability and Capacity During Acute Phase of Disasters and Disaster Responses**  
P. Gardner-Stephen, Bedford Park, SA/AU
- 14:45 - 14:55 **A-0337 - State Failure as a Factor in International Global Medical Operations: Network Modeling**  
A. Trufanov<sup>1</sup>, A. Rossodivita<sup>2</sup>, M. Aminova<sup>3</sup>, A. Tikhomirov<sup>4</sup>, A. Caruso<sup>2</sup>, R. Umerov<sup>5</sup>; <sup>1</sup>Irkutsk/RU, <sup>2</sup>Milan/IT, <sup>3</sup>Brussels/BE, <sup>4</sup>New York, NY/US, <sup>5</sup>Simferopol/UA
- 14:55 - 15:05 **A-0338 - Time For Order in Chaos! A New Model to Capture the Role of Foreign Field Hospitals after Disasters**  
K. Lind, L. Westman, M. Gerdin, A. Wladis, J. von Schreeb; Stockholm/SE
- 15:05 - 15:15 **A-0340 - The Role of Field Hospitals in Severe Environments—Guidelines to Prepare and Build a Field Hospital During a Disaster.**  
A. Rossodivita, Milan/IT
- 15:15 - 15:25 **A-0341 - Disaster! What About Me?**  
H. Al-Qusimy, Muscat/OM
- 15:25 - 15:35 **A-0342 - Distribution Network Design in Relief Chain Management: Learnings from the 2008 Kosi Floods, Bihar, India**  
A. Prakash, Mumbai/IN
- 15:35 - 16:30 **Discussion**



17<sup>th</sup> World Congress on Disaster and Emergency Medicine & 14<sup>th</sup> Conference of the Chinese Society for Emergency Medicine  
第17届世界灾难及急救医学学术会议暨第14次全国急诊医学学术年会 31 May - 3 June, 2011 Beijing, China 2011年5月31日-6月3日 中国·北京

**Saturday, June 4, 2011**

WS2b - Post Congress Course

09:00 - 17:00

**Guidelines for Evaluation and Research in Disaster Management:  
Conceptual, Structural, Operational, and Research Frameworks and  
Methodologies - Part 2**

**MR 05 (Hall 307)**





## Friday 3 June

### PP18 - Case Studies in Emergency Medicine

10:15 - 11:00

Moderation: E. Smith, Cairns/AU

**CB0025**

#### P2-057 - When A Glue Sniffer Turns Weak

J. Poh, Singapore/SG

#### P2-058-A Multicasualty Event of Multiple Burn Victims Caused by Spout of Heated Hydrochloric Acid in a Chemical Plant

N. Fuke, M. Sato, H. Shiga, M. Yamashita, T. Yokoi, Y. Kobayashi, A. Kobayashi, R. Ikita; Ichihara, Chiba/JP

#### P2-059 - Monocular Vision Loss Following Blunt Trauma

P. Pustinger, D. Paratore; Farmington Hills, Michigan, MI/US

#### P2-060 - Thyroid Storm in the Emergency Department

M. van Veelen, L. Yurtsever, M. Baggen, E. Dubois; Rotterdam/NL

#### P2-061-Hiccups with Chapman/Carberrra Sign and Left Bundle Branch Block in Anterior Wall Myocardial Infarction

D. Mishra, D. T. Koli; New Delhi/IN

#### P2-062 - An Infrequent Case of Orthopedic Emergencies—Open Dorsal Dislocation of the Proximal Interphalangeal (PIP) Joint Dislocation

A. BAYIR<sup>1</sup>, U. KALDIRIM<sup>1</sup>, S. ARDIC<sup>2</sup>, Y. EYI<sup>1</sup>, I. ARZIMAN<sup>1</sup>, M. DURUSU<sup>1</sup>; <sup>1</sup>Etlik - Ankara/TR, <sup>2</sup>Ankara/TR

#### P2-063 - An Evaluation Of 57 Tick Bite Cases

M. ORTATATLI<sup>1</sup>, R. GUMRAL<sup>2</sup>, H. UCKARDES<sup>3</sup>, M. EROGLU<sup>1</sup>, L. KENAR<sup>1</sup>, Y. EYI<sup>1</sup>, I. ARZIMAN<sup>1</sup>, M. DURUSU<sup>1</sup>; <sup>1</sup>Etlik - Ankara/TR, <sup>2</sup>Ankara/TR, <sup>3</sup>Erzurum/TR

#### P2-064 - Pattern and Factors Associated with Violent Incidents in the Emergency Department of a Level-1 Trauma Center

K. Sharma, S. Bhoi, S. Chauhan; New Delhi/IN

#### P2-065 - Perception of Emergency Care Providers Toward the Implementation of an Electronic Medical Record System in the Emergency Department of a Level-1 Trauma Center

S. Chauhan<sup>1</sup>, S. Bhoi<sup>1</sup>, D. T. Sinha<sup>2</sup>, M. Rodha<sup>2</sup>, G. Adhikari<sup>2</sup>, G. Sharma<sup>2</sup>, K. Sharma<sup>2</sup>, R. Kumar<sup>2</sup>; <sup>1</sup>110029/IN, <sup>2</sup>New Delhi/IN

#### P2-066 - Experience of 14 Cases Exposed to Hydrazine

S. TUNCER, M. DURUSU, I. ARZIMAN, Y. EYI, A. BAYIR, U. KALDIRIM, A. YILDIRIM, M. ERYILMAZ; Etlik - Ankara/TR

#### P2-067 - Torsade de Pointes and Ventricular Fibrillation Accompanying Intracerebral Hemorrhage

C. Hsu, Y. Chen; Taipei/TW

