

2012

## International Emergency Medical Services Congress 2005

Brian Fallows

[brian.fallows@med.monash.edu.au](mailto:brian.fallows@med.monash.edu.au)

---

### Recommended Citation

Fallows, B. (2006). International Emergency Medical Services Congress 2005. *Australasian Journal of Paramedicine*, 4(1). Retrieved from <http://ro.ecu.edu.au/jephc/vol4/iss1/16>

This Journal Article is posted at Research Online.  
<http://ro.ecu.edu.au/jephc/vol4/iss1/16>

## CONFERENCE REPORT

Article 990181

### **International Emergency Medical Services Congress 2005**

Crowne Plaza Hotel, Dubai  
13<sup>th</sup> September 2005

#### **Brian Fallows**

Monash University Centre for Ambulance and Paramedic Studies, Australia

This is the third conference of its type in Dubai and follows a theme of presenting topics relevant to pre-hospital management in the Arabian Peninsula area. This year will see Arab Health present the regions first ever 'Middle East Trauma' conference, which is particularly relevant when one considers the tremendous growth in infrastructure within the region and consequent demand upon trauma facilities.

The conference heard speakers from the United Kingdom, Germany, United Arab Emirates, the Middle East and Australia. Topics ranged from:

- *Provision of assistance during the January 2005 Tsunami,*
- *Designing and implementing an EMT system to reduce response time, and*
- *Major incident response and the place for doctor manned helicopters in the pre-hospital setting.*

#### **Mr Ron Blough** (EMS Instructor, Dubai)

*The Future of EMS in a Rapidly Developing region.*

Ron discussed the need for an appropriately trained EMS Service in a region that is rapidly expanding and which needs to confront situations that demand a highly trained EMS Service. He paid particular attention to two aspects. Firstly the distinction between a Service that provides BLS standard of care and one that provides an ALS standard of care. Ron was clearly advocating a Paramedic standard of care equipped to deliver an ALS quality service. His second part of the topic presented the idea of utilising expatriate training organisations - his point of view being that it could be appropriate to make use of such providers with the ensurance that training content is aligned with the cultural and demographic environment of the particular region.

#### **Dr Abdul Wahab Al Musleh** (Assistant Medical Director, Hamad Medical Corporation, Qatar)

*Health Care Response to Major Incidents.*

Dr Al Musleh discussed the Dohar bombing. He highlighted the emergency management issues which arose as a consequence of the bombing and as he spoke of the scene management challenges, when the bombing was initially managed as a structural fire incident. Confusion reigned as an off duty supervisor, without sufficient information, took

*Author(s): Brian Fallows*

charge of the scene. This led to medical management challenges and conflicting priorities between the responding Emergency Services during the triage of casualties. Dr Al Musleh concluded his presentation with an overview of the triaging philosophy that was employed during this incident.

**Dr Firas Adil Tawfiq Al Rawi** (Emergency Physician and Senior Instructor, HMC, Doha, Qatar)  
*Revising the Disaster Plan In-Line with the Post-Incident Review.*

Dr Firas covered the issues that were reviewed following the Dohar bombing. Whilst cooperation and inter-agency training had been a feature of disaster management training, the Dohar bombing revealed that there was still more work to be done in this area. Strategies needed to be developed and implemented to ensure that future incidents have a superior management plan in place to facilitate the smooth integration of the various combating agencies.

**Mr Brian Fallows** (Lecturer, Monash University Centre for Ambulance and Paramedic Studies, Australia)  
*The Key Role of Triage at Major Disasters.*

As a speaker at the conference, I also had the opportunity to demonstrate the significance of triaging in a major disaster by reflecting on the experiences of the two previous speakers. It was stressed that triaging can only work successfully when all parties understand the practice of triaging, are in shared agreement about the triaging process, and practice the skill of triaging within their own organisations to effectively employ those skills in the multi-agency exercise or disaster setting.

**Mr Omer Sakaf** (Head of Training, Dubai Police Ambulance Service, Dubai)  
*Case Study Design and Implementation of a System to reduce response times.*

Omer discussed the steps that Dubai Police and Ambulance were taking to reduce response times and deliver the highest standard of service delivery and care to the people of Dubai. This included more Ambulance Stations, motorcycle mounted Paramedics to negotiate narrow roads more safely and effectively, some smaller designed Ambulances to cope with congested highways and the introduction of Intensive Care trained Paramedics to deliver the highest standard of care to patients.

**Dr Dirk W Sommerfeldt (A/Professor, Hamburg University Medical School)**  
*The German 'Flexible Response' System of Trauma Care:  
Organisational Costs, Results and Future Aspects*

**Dr Gareth Davies** (Consultant in Accidents and Emergency Medicine and Prehospital Care, UK)  
*Delivery of Critical Care on the Roadside*

**Dr Syed Masud** (Lead HEMS Doctor, Great North Air Ambulance Service, UK)  
*Training Issues Surrounding Delivery of Critical Care*

These three presentations were of particular interest because of the debatable points of view expressed by the presenters. Dirk posed that from the German perspective, (in his opinion), the cost of a Doctor staffed helicopter service was prohibitively expensive, with little evidence to show that patient outcomes were more superior compared to other treatment

*Author(s): Brian Fallows*

modalities. On the other hand Gareth and Syed from the London Ambulance Service argued that the only standard of care offered to selected trauma patients, should be the same as that delivered by a Hospital, concluding that all helicopters must be manned by doctors, and that whilst the cost may be high, it is justified.

**Lt Saif Abdullah M** (Head of Operations Section, Operation Ambulance Department, Dubai)  
*Case Study: Lessons Learned from the Asian Tsunami*

Lt Saif, in a very powerful presentation walked the delegates through what he and his team had experienced during their deployment to Indonesia, while covering all of the issues and difficulties experienced in deploying emergency medical teams to a remote area. Aspects included the risks and dangers experienced by the team, and the need for team members to be self-reliant and able to look after their own resources, both material and financial. Of particular note was the psychological impact that this had on the team both during deployment and on return to Dubai. The conference delegates applauded the efforts of the Dubai Police Ambulance Rescue Team.

The conference was an interesting and worthwhile event, bringing together colleagues from both within the immediate area and from Europe and Australia. This allowed for the presentation of a variety of views that all could reflect upon and consider, whether or not it was applicable in their own particular domain.

As in previous years the organisation, venue, facilities and support provided to the conference was of the highest standard.