

# International Emergency Medicine

Gautam G. Bodiwala, CBE, DL  
DSc (Hon), MS, FRCS, FRCP, FCEM, FIFEM

President 2006-10  
International Federation for Emergency Medicine  
Pro Chancellor  
De Montfort University, Leicester, UK

श्रीगणेशायनमः अथातो दीर्घजीवितीयमध्यायं व्याख्यास्यामः ॥ इति हस्माह भगवानाचार्यः ॥ दीर्घजीवितमन्त्रि  
 कृन्भरहाजउपागमत इन्द्रमुयतपावध्वाशरणममरेश्वरं ब्रह्मगार्हपत्यश्रोत्रमायुर्वेदप्रजापतिः जयाह  
 निखिलेनादादाश्चनोहपुनस्ततः अश्विभ्यां भगवान् शक्रः प्रतिपेदेहिकेवले ऋषिप्रोक्तो भरहाजस्तस्माद्वके  
 मुपागमत विष्णुभृतायदारोगाः प्रादुर्भूताः शरीरिणा उपवासतः पादब्रह्मचर्यव्रतायुषो तदाभूते धनुर्क्रो  
 शं पुरस्कृत्य महर्षयः समेता पुण्यकर्माणाः पार्श्वीहमवतः अमे अगिरागमद प्रिश्चवशिष्टः कश्यपो भृगुः  
 आत्रेये गौतमः सारव्यः पुलस्त्यो नारदौ सितः अगस्त्यो वामदेवश्च मार्कंडेयाश्च लायनो पारीक्षिर्भिह्वरात्रे  
 यो भरद्वाजः कपिलः विश्वामित्रश्च मरुतो च भार्गवश्च वनोभिजित् गा र्ग्यः शांडिल्यकोटिन्प्राब्रह्म  
 देवसगालवो सांख्यो वैजयापश्च कुशिको वादग्यगः वडिशः शरत्तोमाचकाप्यकात्यायनोऽम्भो को  
 काप्यनः केकशो धौम्यो भार्गविकश्च यो शर्कराहो हिरापाहो लोकाहः पैमिरेव च शोनिकः शाकुनेप  
 गी

जिता  
जिता

रुपे

राम-  
१

CHARAK – An Indian Physician, 300BC  
 From Charak Samhita



## ANCIENT EGYPT

IWTY

XIXth DYNASTY  
PHYSICIAN



## ANCIENT GREECE

ACHILLES BANDAGING WOUNDS

C.50 BC





## ANCIENT CHINA

MING DYNASTY  
14th -17th Century

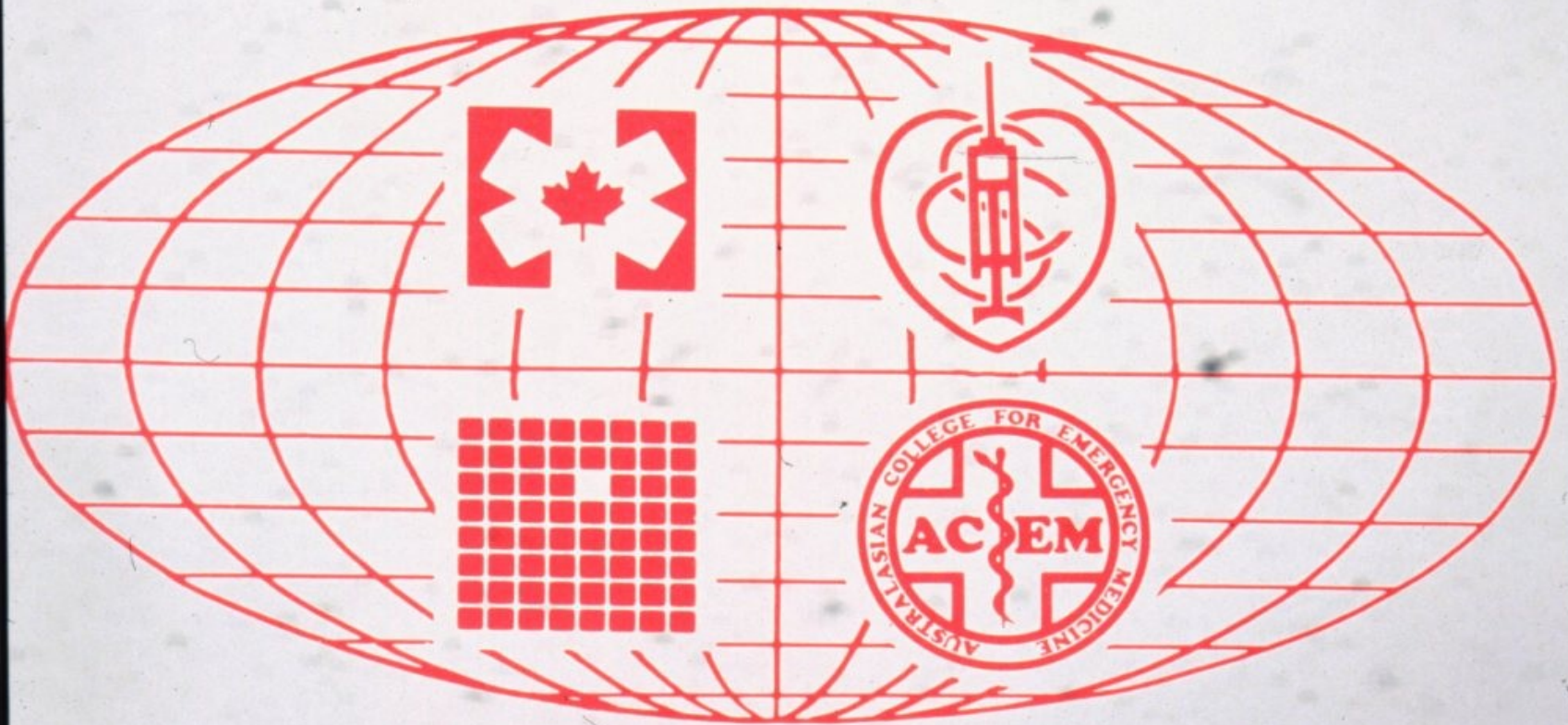
ACUPUNCTURE  
CHART



Casualty Surgeons' Association 1967



# FIRST International Conference on Emergency Medicine London '86



# International Federation for Emergency Medicine



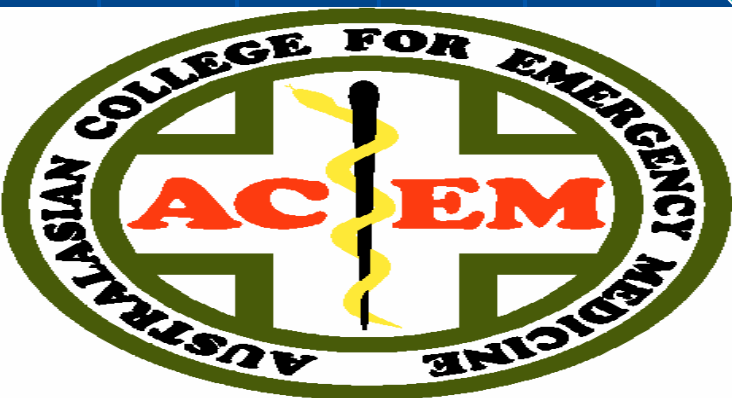


CSA  
Est. 1967



Est. 1968

FOUNDERS

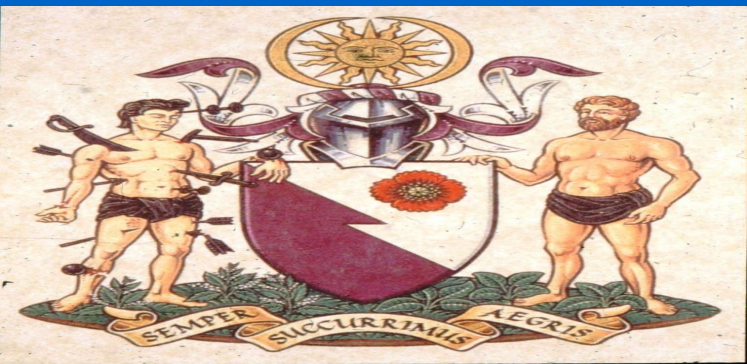


Est. 1983



Est. 1978



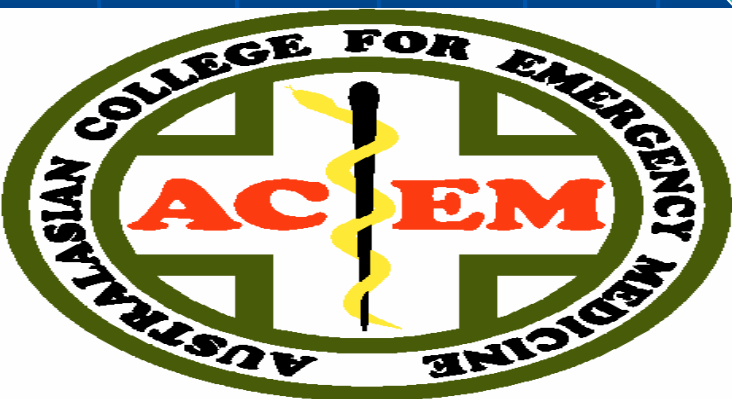


CEM  
Est. 1967

FOUNDERS



Est. 1968



Est. 1983



Est. 1978

# IFEM Definition of

## EMERGENCY MEDICINE

`...a field of practice based on the knowledge and skills required for the prevention, diagnosis and management of acute and urgent aspects of illness and injury affecting patients of all age group with a full spectrum of episodic undifferentiated physical and behavioural disorders; it further encompasses an understanding of development of prehospital and inhospital emergency medical systems and the skills necessary for this development'.

# International Federation for Emergency Medicine

## *Mission:*

`.. To promote at an international level interchange, understanding and cooperation among physicians practicing Emergency Medicine’.

## *One of the Goals:*

` To offer advice and guidance to emergency medicine practitioners worldwide in the formation of national association and training and certification programmes’.



# Models of Emergency Care

- *Anglo American Model* – EPs generally hospital based and emergencies are rapidly transported to hospitals
- *Franco German Model* – initial physician treatment of emergency at scene

# Measures of National EM Development

	Underdeveloped	Developing	Developed
National Organisation	No	Yes	Yes
Residency Training	No	Yes/No	Yes
Board Certification	No	Yes/No	Yes
Official Specialty Status	No	Yes/No	Yes

# Measures of National EM Development (Contd.)

	Underdeveloped	Developed	Developed
Specialty Journal	No	Yes/No	Yes
Research	No	Yes/No	Yes
Database	No	No	Yes
Subspecialty Training	No	No	Yes
QI Programmes	No	No	Yes
CME Required	No	Yes/No	Yes
Peer Review	No	No	Yes



# Comparison of Patient Care System

	Underdeveloped	Developing	Developed
EPs	House staff & other Drs	Some EM trained	EM trained
ED Director	Other	EM Physician	EM Trained Physician
Prehospital Care	Private cars/Taxis	BLS/EMT Amb	Paramedic or Drs
Transfer System	No	No	Yes
Trauma System	No	No	Yes

# TURKEY

- Underdeveloped to Developing EM

*Well Done!*

# What is International EM?

*Understanding and Helping other countries Develop*

- EM & EMS
- Training programmes/Examinations
- EM Clinical Facilities
- EM as a recognised specialty
- Exchange programmes
- Exchange of Science and Art of EM
- *Coordinate with relevant EM Societies*
- *Coordinate with international agencies*



# Why Increased Interest in International EM

- Recent realisation by countries to develop EMS
- Influence of EPs from developed systems and western world
- Collapse of communism opening up many countries
- Demonstrated success of EM in countries like UK, USA, Australia
- Active involvement in international EM by CEM, ACEP, ACEM etc

# Why Increased Interest in International EM (Contd.)

- Overall Medical System Developments
- Multiple International Conferences
- Rapid Urbanisation
- Increased international Travel
- Terrorism and other mass casualty events

# World Health Assembly (WHO)

## Health Systems: Emergency Care Systems

- To identify a core set of trauma and **emergency care** services and to develop methods for assuring and documenting that such services are provided appropriately to all who need them
- To determine standards, mechanisms and techniques and to provide support to Member states QI programmes and methods needed for competent and timely provision of trauma and **emergency care**

*Resolution 60:22*



# Benefits of International EM Experience

- Exposure to and interaction with other cultures
- Learning novel approaches to common clinical problems
- Opportunities to see clinical problems not common in one's own country
- Personal satisfaction

# Potential Disadvantages of International EM work

- Frustration due to local resources limitations
- Frustrations due to local bureaucracy
- Language difficulties restricting interaction with patients and doctors
- Personal Safety
- Cost to family and personal life

# Development of EM

in a country depends on:

- Healthcare development
- Variety of diseases
- Resources available
- Availability of trained physicians
- Public demands
- Geographical and Cultural demands

# Opportunities for Turkey in International EM work

- Participate in IFEM activities
- Attend and participate in conferences
- Exchange lessons learnt in EM
- Contribute to international research
- Contribute to int. publications
- Join other organisations focused on other countries

# International Conferences on Emergency Medicine

- First ICEM – London 1986
- Further TWO ICEMS in the UK
- Next ICEM 2014 Hong Kong  
*(10-15 June 2014 - 15th ICEM)*



# Other Conferences

- EuSEM and MEMC
- Asian Conferences
- Latin American Conferences
- Pan American Conferences
- Pan Arab Conferences
- African Conferences

# **RICHARD ASHER'S EP TRIAD**

1. Use of Eyes and Ears
2. Use of Tongue
3. Use of Common sense

# **GAUTAM BODIWALA'S EP TRIAD**

4. Understanding
5. Usefulness
6. Uniqueness

# CEM involvement in International EM – *an example*

- Hosted First ICEM 1986  
and subsequently TWO more
- Founder Member of IFEM
- Providing leadership to IFEM/EuSEM
- Helped develop EM in other countries
- 'Exporting' quality and standards of EM  
curriculum, training, examination and  
clinical care
- Many 'silent' contributors
- Participating in Government MTI

# EMERGENCY MEDICINE

*A Good Name Is Rather To Be Chosen  
Than Riches*

A Proverb

The name 'Emergency Medicine' gives

- Identity
- Dignity
- Creates right public image
- Describes its function

# Future of International EM

- Emergency Care for all
- WHO involvement
- Continued participation of IFEM and its member countries in further developing EM
- International Exchange
- Multinational research and publications
- International journal



No body can do everything but  
everybody can do something.

*Anonymous*

A close-up photograph of a pink rose with soft, layered petals. The rose is set against a warm, orange-toned background. Overlaid on the center of the rose is the word "Thanks" in a blue, elegant cursive script.

*Thanks*