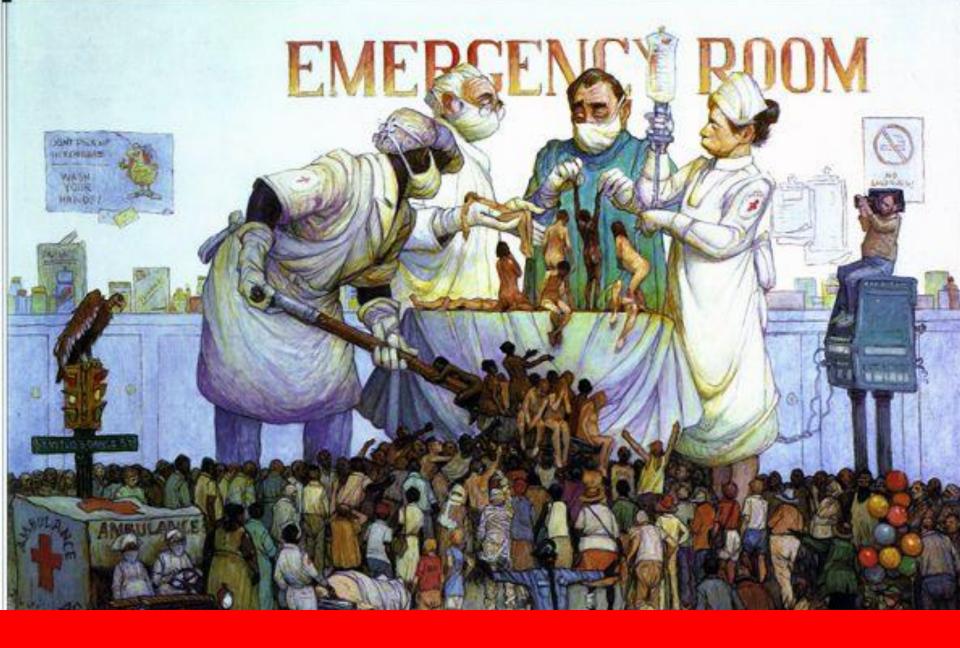
Advancement in Emergency Medicine and Common Issues in the Progress

Ayesha Khan, MD, MPH
Assistant Professor Emergency Medicine
Stanford School of Medicine





EMERGENCY

ROOM



EMERGENCY

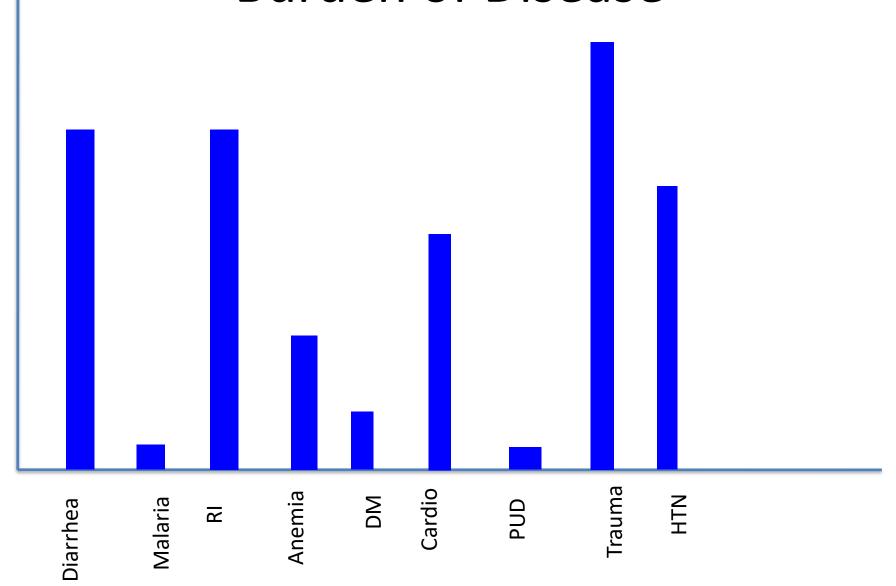
MEDICINE



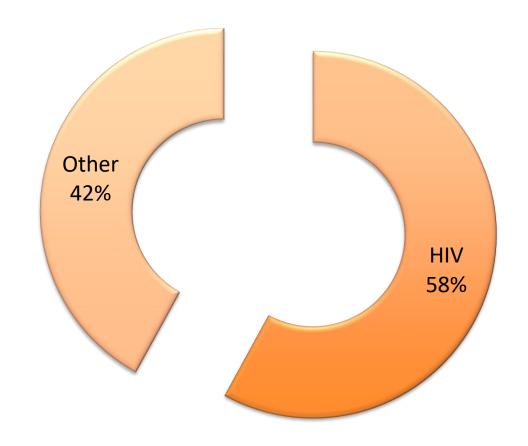
ADVANCEMENT



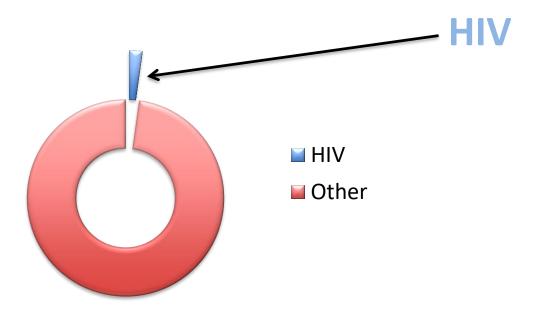
Burden of Disease



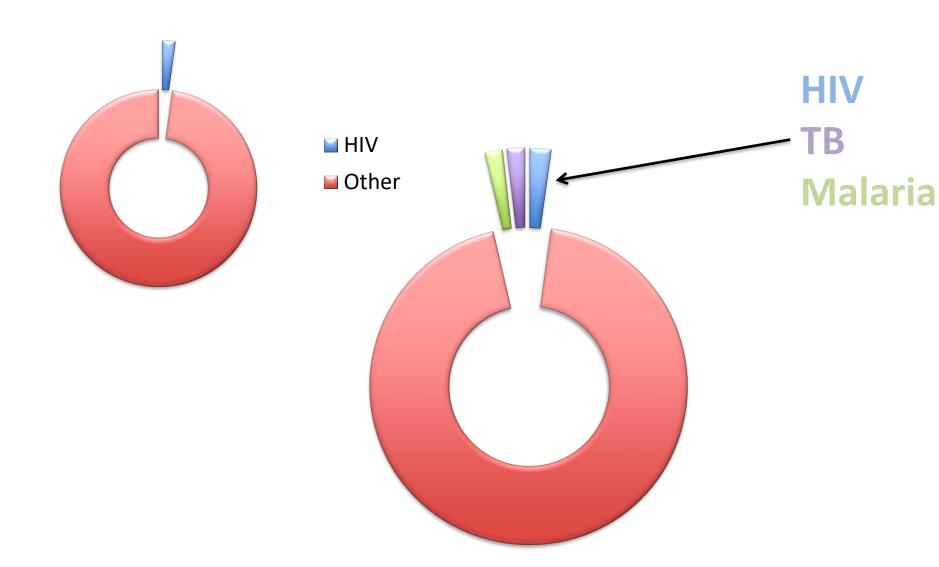
Development Spending



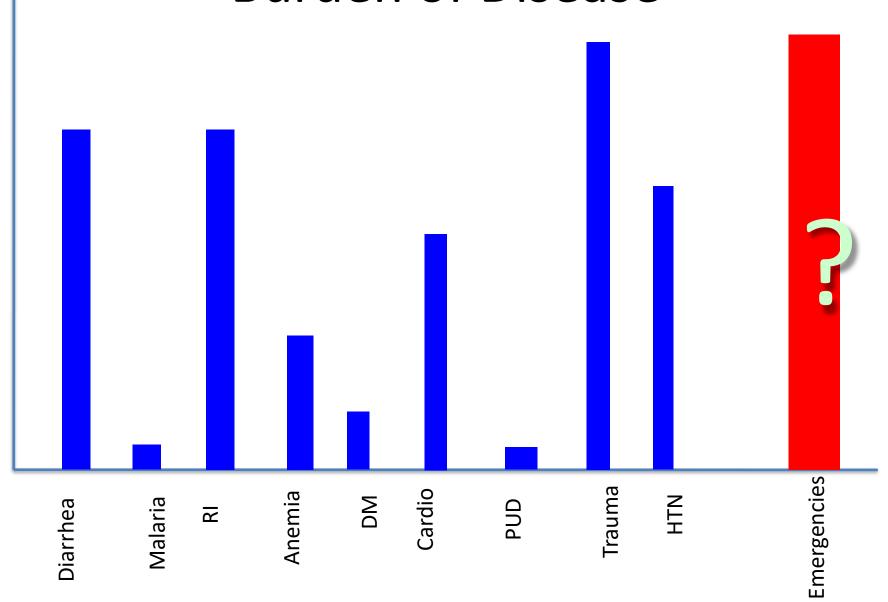
Global Burden of Disease



Global Burden of Disease



Burden of Disease





POPULATION HEALTH

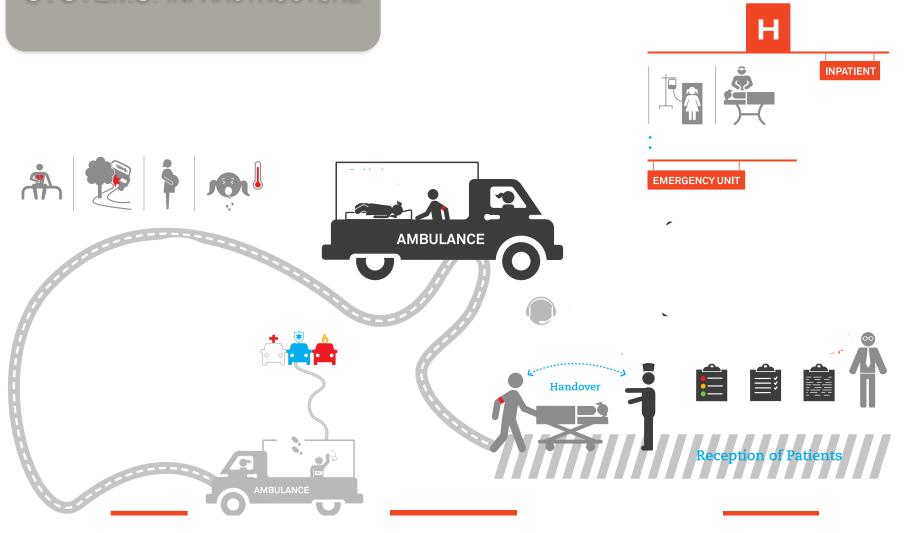








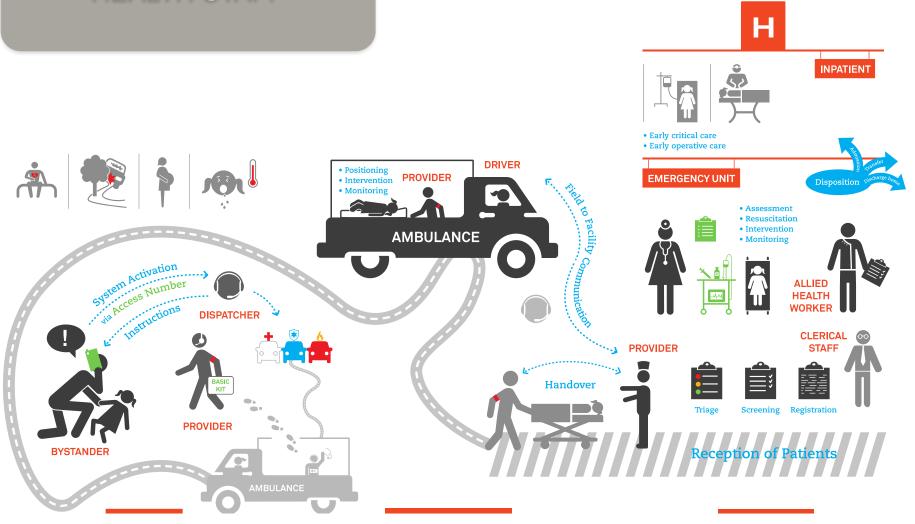
SYSTEMS: INFRASTRUCTURE



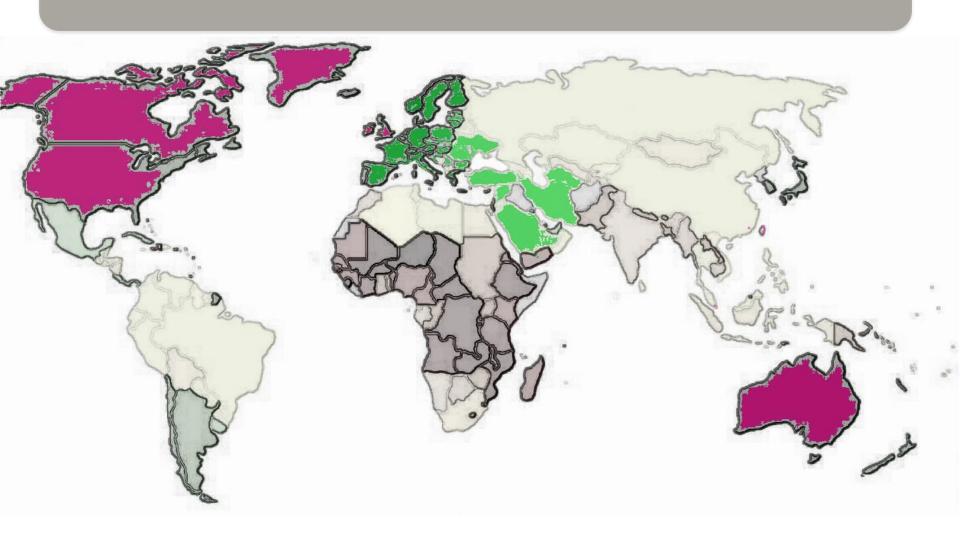
SYSTEMS: PROTOCOLS+STANDARDIZATION



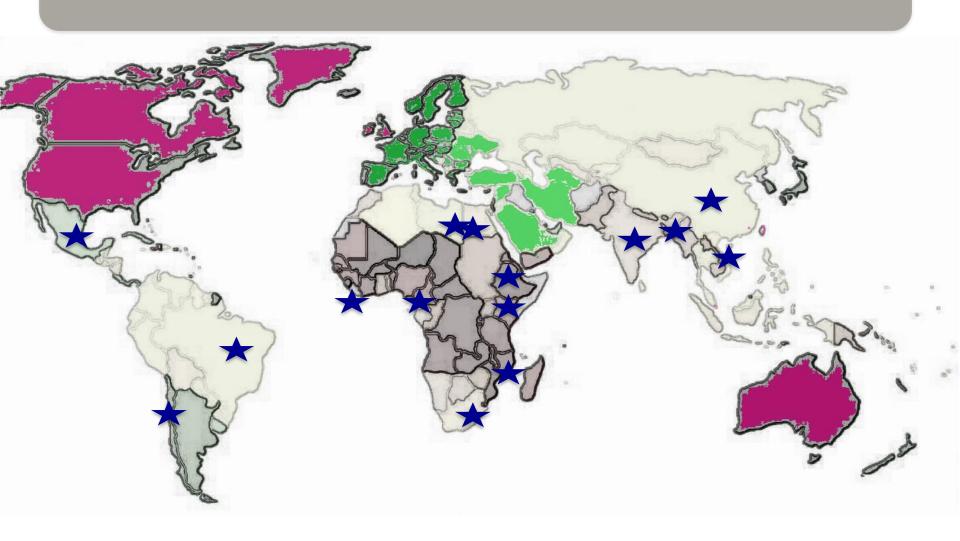
HEALTH STAFF

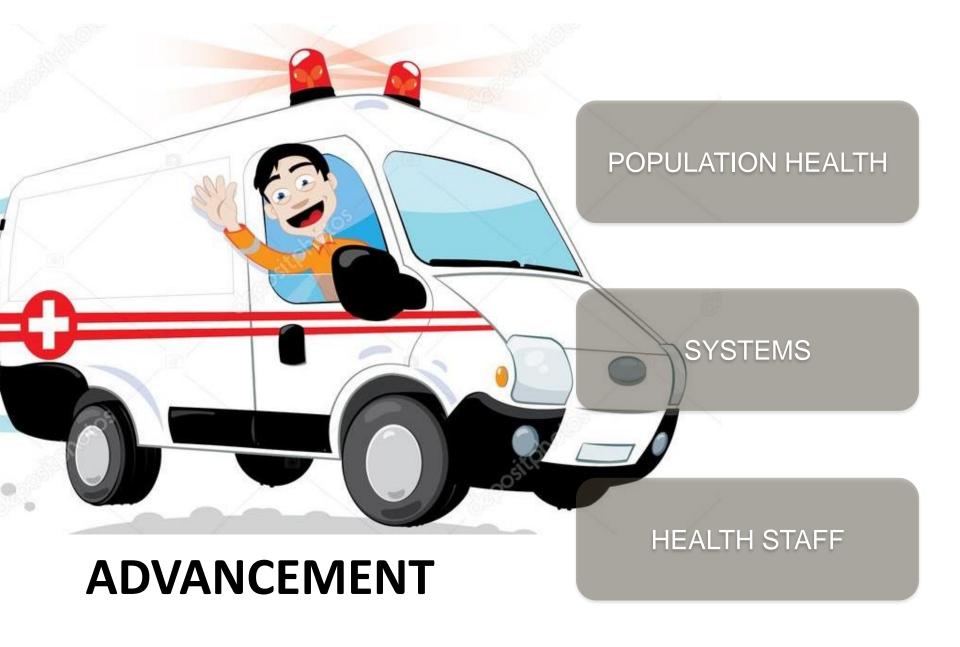


OUT OF THE ROOM...



...INTO THE WORLD







COMMON ISSUES



INNOVATIVE SOLUTIONS FOR LOW RESOURCES





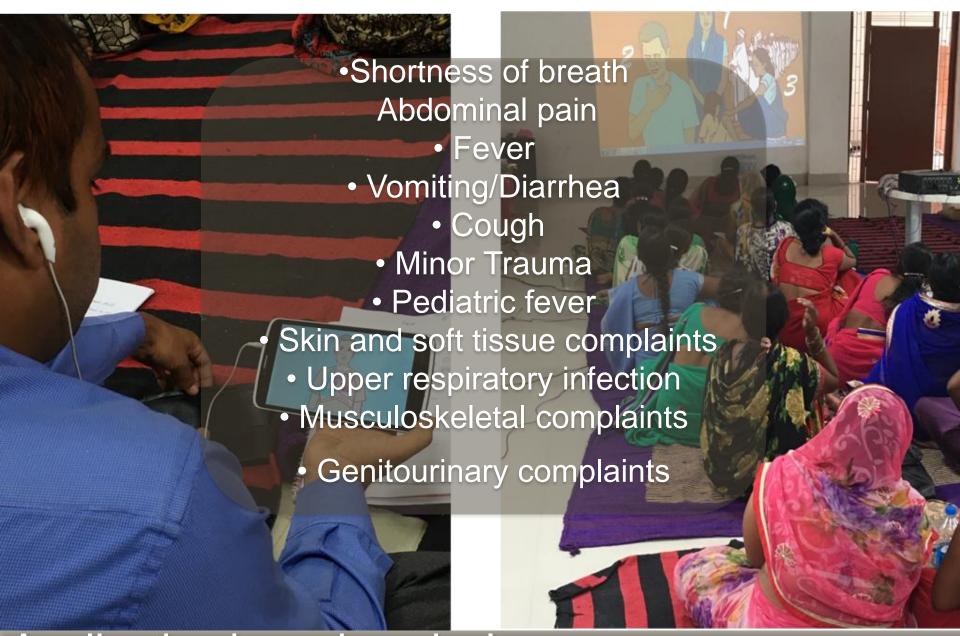






HEALTH STAFF INPATIENT • Early critical care • Early operative care **DRIVER** PositioningIntervention **PROVIDER EMERGENCY UNIT** Assessment • Resuscitation • Intervention **AMBULANCE** Monitoring System Activation ystem Acuvation Access Number HEALTH Instructions **DISPATCHER** CLERICAL 💿 **PROVIDER** STAFF Handover Screening Registration **PROVIDER**

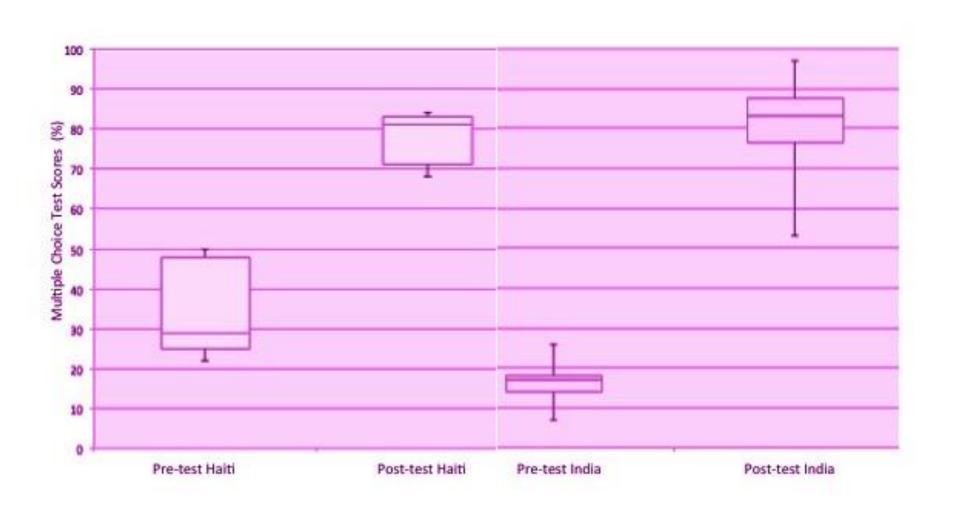




Application based curriculum



Pre-test/Post-test





WHAT LIES AHEAD









"They will become weak day by day in this camp," he says. "I can't give them an education here, or work. They can't do anything."



ADVANCEMENT

"REMEMBER, WHAT YOU DO, MATTERS"

Mel Herbert

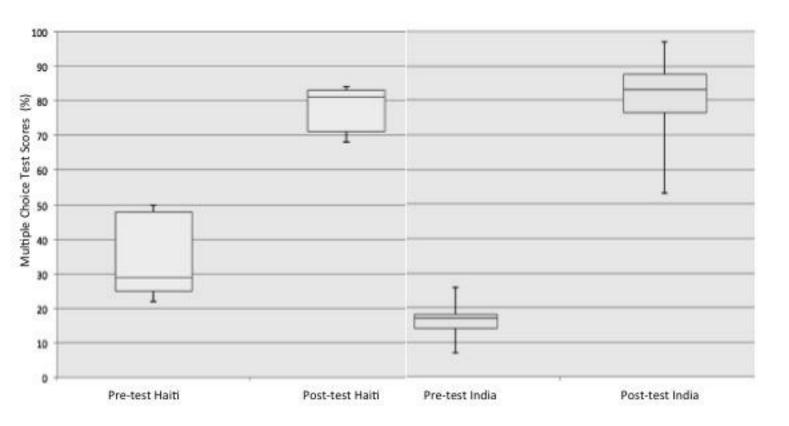
QUESTIONS?



...INTO THE WORLD

Ambulances







All around the world, acutely ill and injured people seek care every day. Frontline providers manage children and adults with injuries and infections, heart attacks and strokes, asthma and acute complications of pregnancy. An integrated approach to early recognition and management saves lives. This visual summary illustrates the essential functions of a responsive emergency care system, and the key human resources, equipment, and information technologies needed to execute them.

> System Activation Access Number

hstructions

DISPATCHER

PROVIDER



PROVIDER

AMBULANCE

DRIVER

COMMUNICATION

Positioning

• Intervention Monitoring









• Early operative care













 Assessment • Resuscitation



PROVIDER

Triage





CLERICAL

Screening Registration

SCENE

- BYSTANDER RESPONSE
- DISPATCH

BYSTANDER

• PROVIDER RESPONSE

TRANSPORT

- PATIENT TRANSPORT
- TRANSPORT CARE

Handover

- RECEPTION
- EMERGENCY UNIT CARE
- DISPOSITION
- EARLY INPATIENT CARE



Challenges Ahead







Questions?



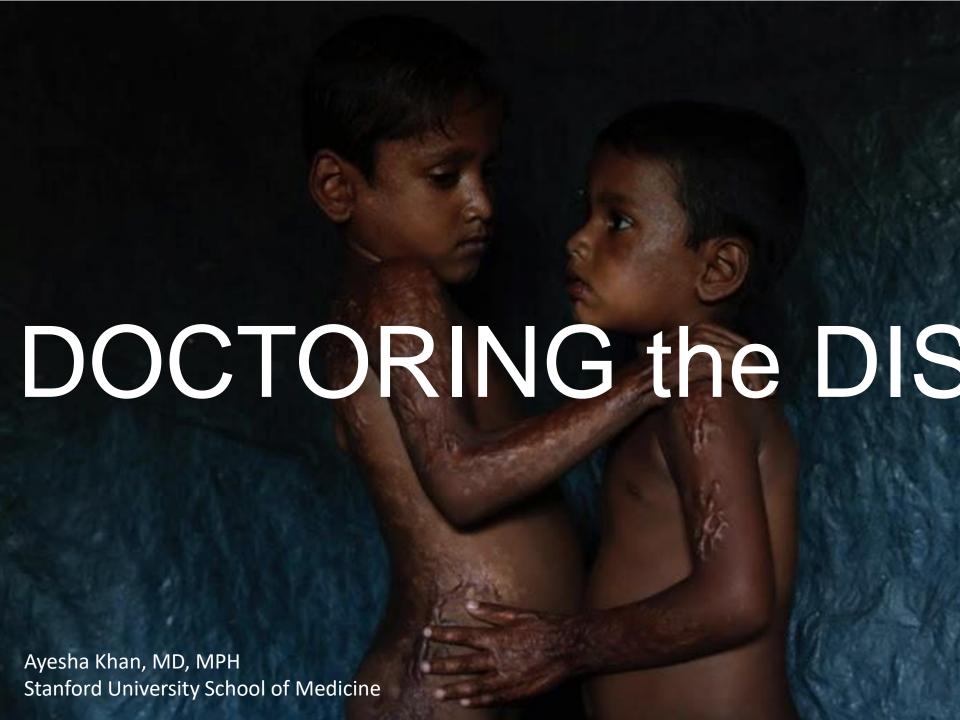
POPULATION HEALTH

Systems

SYSTEMS

GLOBAL

Standardized Care





"They will become weak day by day in this camp," he says. "I can't give them an education here, or work. They can't do anything."

"We cannot go back.
When I sleep at night, I
will feel fear. Will the
military come to capture
me? Set fire to my
house? Always we will be

Questions?

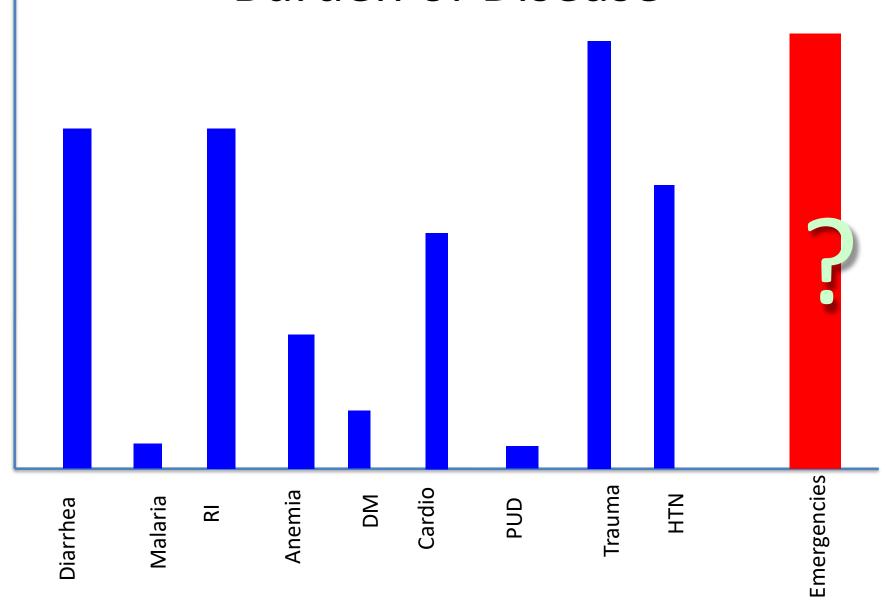




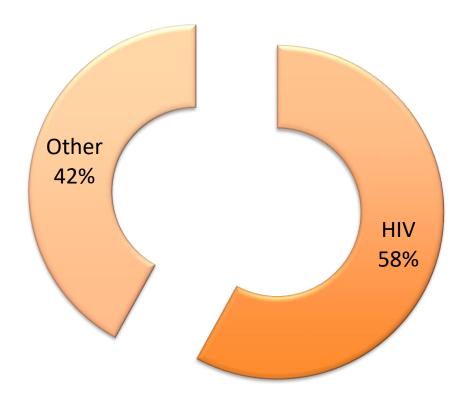
Acute services therefore include all promotive, preventive, curative, rehabilitative or palliative actions, whether oriented towards individuals or populations, whose primary purpose is to improve health and whose effectiveness largely depends on time-sensitive and, frequently, rapid intervention.



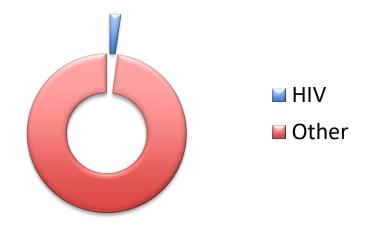
Burden of Disease



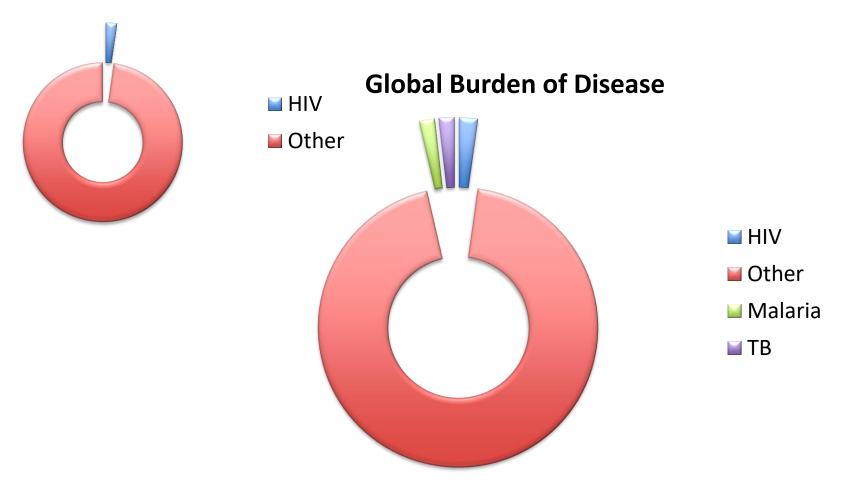
Development Spending



Global Burden of Disease



Global Burden of Disease













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hstructions

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PROVIDER



PROVIDER

AMBULANCE

DRIVER

COMMUNICATION

Positioning

• Intervention Monitoring









• Early operative care













 Assessment • Resuscitation



PROVIDER

Triage





CLERICAL

Screening Registration

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BYSTANDER

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• Early operative care













 Assessment • Resuscitation



PROVIDER

Triage





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 Assessment • Resuscitation



PROVIDER

Triage





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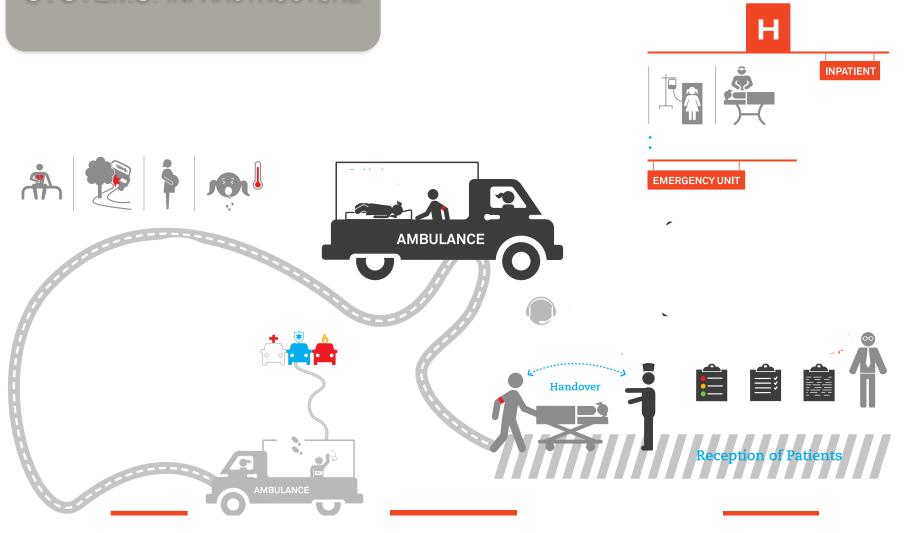
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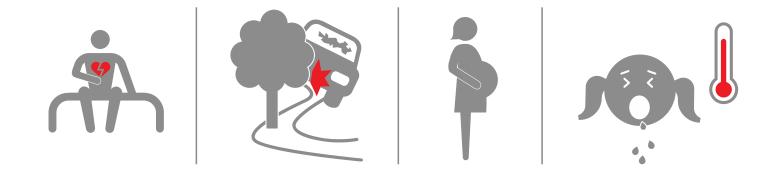


SYSTEMS: INFRASTRUCTURE

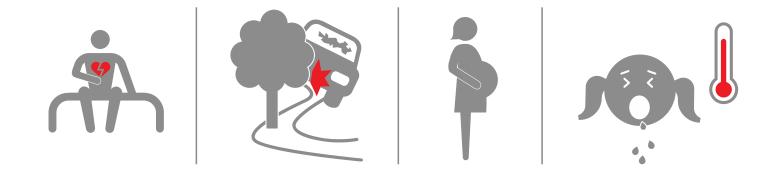


• Tuk tuk ambul





We See Everything



We See Everything

SYSTEMS: INFRASTRUCTURE

