Session 2: Competencies 2

Chairs: Geert Seynaeve; P. Hustinx

"Bombs, Blasts, and Bullets" (B3)—Using Knowledge to Arm the Innocent

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Australia has little experience in the medical management of multiple casualties from terrorist incidents. Because of strategic alliances in recent years, Australians at home and abroad increasingly have become a target of interest. Therefore, it is important to develop educational programs for medical and paramedical responders to address the lack of local knowledge in this arena.

The authors outline the development of the "Bombs, Blasts and Bullets" (B3) course, an Australian, one-day intensive course to introduce the participants to the considerations required in managing multiple victims of conventional weapons. Little pre-existing knowledge could be assumed, and little budget was available for the course. In addition, significant skepticism regarding the potential threat to Australia had to be addressed. These factors would be shared by many other countries that have never been directly threatened by terrorism.

To date, several courses have been taught at the state level over the last two years, culminating in the first federal B3 course last year. Feedback generally has been excellent, and has guided the formation of the curriculum.

In addition to the course itself, additional benefits have been reaped from the online presence of collaborating experts. This online presence permits access to the faculty, and further opportunity for collaboration via the Delphi Method. Keywords: Australia; Bombs, Blasts and Bullets (B3) course; medical

management training; multiple casualties; terrorist incidents Prehosp Disast Med 2007;22(2):s5

Just-in-Time (JIT) Lectures: An Efficient Approach for Increasing of Disaster Risk Awareness

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The Global Health Network (GHN) for Disasters, including scientists mostly from the US, Iran and Russia, developed two "just-in-time" (JIT) lectures following the South Asia Tsunami in December 2004, (http://www.pitt.edu/~super1/lecture/lec18071/index.h tm) to provide information about the science of Tsunamis, in general, and, specifically, the most recent disaster and to provide information on how the science can help the communities in primary and secondary prevention in the event of a Tsunami. The same approach had been used in the Bam earthquake, Hurricanes Katrina and Rita and the Pakistan earthquake. This article introduces the methodology and applications of the JIT lectures in disasters and its application in the framework of Disaster Risk Reduction.

The crude estimate showed that in a six-month period, over 255,000 people, worldwide, obtained information from the tsunami lectures. Also, the feedbacks showed that they included a wide spectrum of disciplines and education level, including public health scientists, oceanography and meteorology educators, librarians, international aid organizations and also high school teachers. The JIT lecture about the Bam earthquake had been used worldwide by thousands of educators and seen by a multitude of students.

Just-in-time education can be applicable in future disasters throughout the world as an efficient, educational approach for people and educators who seek information. Just-in-time education can provide an educational strategy to promote risk awareness in the context of disaster risk reduction (DRR) framework.

Keywords: disaster risk reduction; distance education; "just-in-time" education; e-learning, preparedness

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Analysis of Interdisciplinary, Simulation-Based Triage Training for Disaster Preparedness and Response

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Mass-casualty triage establishes the priority of care among casualties when the number of injured exceeds the available resources. Current training relies upon didactic sessions prior to live actor drills that require significant planning and coordination. Simulations can enhance the educational experience, effectively train personnel to employ triage methods, and preserve the knowledge associated with this perishable skill.

The Sim-Patient Triage program is based on prior training systems, including trauma, bioterrorism, and chemical agent casualties. Each synthetic character has its own: (1) injuries; (2) physiology; (3) behavioral model; and (4) signs and symptoms, which change dynamically. Animations such as vomiting, tearing, coughing, and convulsions relate to physiological status. The caregiver can assess and converse with each character, monitor data, and perform medical interventions.

This course of instruction was incorporated successfully with an interdisciplinary disaster preparedness program for students at Duke University. In June 2006, a sample of 262 advanced degree, health science students participated in a qualitative evaluation of the simulation platform and accompanying courseware. In July 2006, under a United States Agency for International Development project to enhance the continuing medical education infrastructure in-country, additional scenarios were developed for use in