

PREHOSPITAL and DISASTER MEDICINE

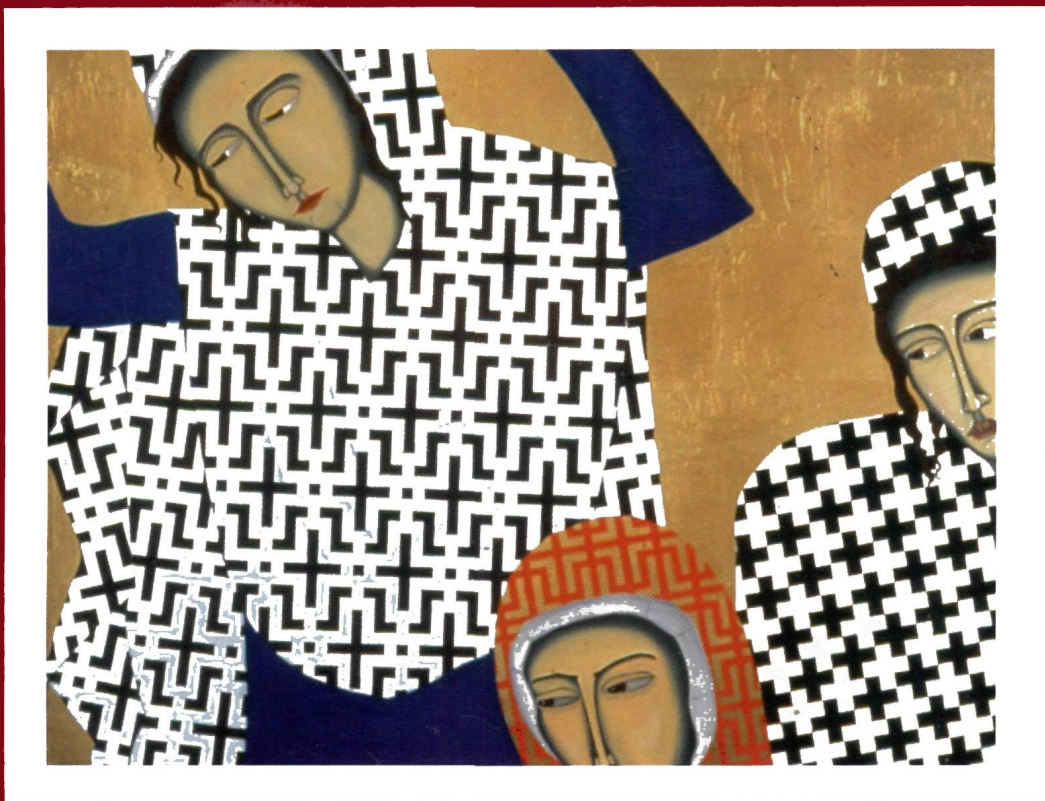
Médecine Pré-Hospitalière et Médecine de Catastrophe

Medicina Prehospitalaria y de Catástrofes

病院にかかる前の処置と
災害医療

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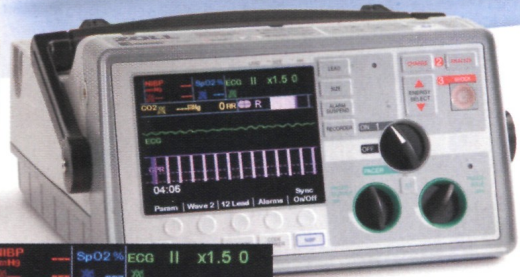
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Table of Contents

Editor's Corner

- Moving Forward** 261
Marvin L. Birnbaum, MD, PhD

Special Report

- West Bank Barrier Decreases Access to Schools and Health Services**263
*Dima Qato, MPH; Shannon Doocy, PhD; Deborah Tsuchida; P. Gregg Greenough, MD, MPH;
 Gilbert Burham, MD, PhD*
- Disasters, Women's Health, and Conservative Society: Working in Pakistan with the Turkish Red Crescent following the South Asian Earthquake**269
Andrew C. Miller, MD; Bonnie Arquilla, DO

Original Research

- Suicide Bombing of the Mineralnye Vody Train: Case Study in Using Open-Source Information for Open-Source Health Intelligence**276
Catherine Y. Lee, MPH; Timothy E. Davis, MD, MPH; Eric K. Noji, MD, MPH
- Use of State Cancer Surveillance Data to Estimate the Cancer Burden in Disaster-Affected Areas—Hurricane Katrina, 2005**282
*Djenaba A. Joseph, MD, MPH; Phyllis A. Wingo, PhD; Jessica B. King, MPH; Lori A. Pollack, MD, MPH;
 Lisa C. Richardson, MD; Xiaocheng Wu, MD; Vivien Chen, PhD; Harland D. Austin, PhD; Deirdre Rogers, MS;
 Janice Cook, MS*
- Mission Failure: Emergency Medical Services Response to Chemical, Biological, Radiological, Nuclear, and Explosive Events**293
Scot Phelps, JD, MPH, Paramedic, CEM/CBCP/MEP
- Comfort Level of Emergency Medical Service Providers in Responding to Weapons of Mass Destruction Events: Impact of Training and Equipment**297
Michael J. Reilly, MPH, NREMT-P; David Markenson, MD, EMT-P; Charles DiMaggio, PhD, PA-C
- Prehospital Emergency Care and Medical Preparedness for the 2005 World Championship Games in Athletics in Helsinki**304
*Tuomas Hiltunen, MD; Markku Kuisma, MD, PhD; Teuvo Määttä, MD; Arto Tennilä, MD; Tuomo Hari, MD;
 Riitta Bäckman; Taneli Väyrynen, MD*
- Disaster Events and the Risk of Sudden Cardiac Death: A Washington State Investigation**313
Laura S. Gold, MSPH; Leslee B. Kane, BS; Nona Sotoodehnia, MD, MPH; Thomas Rea, MD, MPH
- Staff Procedure Skills in Management Groups during Exercises in Disaster Medicine**318
Anders Rüter, MD, PhD; Per Örtengren, MD, PhD; Tore Vikström, MD, PhD
- Effect of Severe Acute Respiratory Syndrome on Bystander Willingness to Perform Cardiopulmonary Resuscitation (CPR)—Is Compression-Only Preferred to Standard CPR?**325
*Kin-Kwan Lam, MRCP (UK), FRCS Ed, FHKAM; Fei-Lung Lau, FRCP Ed, FRCS Ed, FHKAM;
 Wai-Kwong Chan, FRCP, FHKAM; Wing-Nam Wong, MBBS, FHKAM*

- Emergency Department Evaluations of Non-Percutaneous Blood or Body Fluid Exposures during Cardiopulmonary Resuscitation**330
Roland C. Merchant, MD, MPH; Jeremy B. Katzen, AB; Kenneth H. Mayer, MD; Bruce M. Becker, MD, MPH

Brief Report

- Police Officer Response to the Injured Officer: A Survey-Based Analysis of Medical Care Decisions**335
Matthew D. Sztajnkrycer, MD, PhD; David W. Callaway, MD; Amado Alejandro Baez, MD, MS, MPH

- Locking Plastic Tie—A Simple Technique for Securing a Chest Tube**344
Eitan Melamed, MD; Amir Blumenfeld, MD; Guy Lin, MD

Forum

- Radiological Terrorism Scenarios**346
Prof. Jeffery Levett

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Marvin L. Birnbaum, MD PhD, Editor-in-Chief and Director of the WADEM Business Office

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Cover Artwork:	<i>Lamentation</i>
Medium:	Oil and Traditional Goldleaf on a Wood Panel
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This piece is part of a series of figure studies that show contrast between dimension and flat space. It is interesting to note that the women in the piece can be representatives of any culture, making them universal figures of sadness.

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1. **Original Research**—structured research that uses quantitative and/or qualitative data collection and processing methods to establish a hypothesis or prove a cause:effect relationship(s) is included in this category. The manuscript must be structured as follows:

Abstract—Concise summary in the following format (*not to exceed 375 words*):

Introduction: need for the study.

Hypothesis/Problem: what was tested (experimental studies only) If qualitative, statement of problem addressed.

Methods: summary of methods used with subsections as appropriate (type of subjects, number of subjects, study design, statistical tests). If the work is qualitative, the types of instruments used and the scope and type of work must be described. *If a disaster is involved, the dates, type of event, location, scope, magnitude, and numbers of casualties and deaths must be summarized in tabular form for indexing.*

Results: summary of principal findings.

Conclusion: implications of findings.

Introduction—Provide justification for the effort with appropriate references annotated. If quantitative, the concluding sentence should define the hypothesis. If qualitative, the problem being addressed should be stated clearly.

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Results—Results must be written in text and may be accompanied by tables and figures. The text **must** explain all data included in tables and figures, but should not be redundant. All direct results from the study must appear in this section. *No discussion of the results may be included.*

Discussion—The Discussion should provide an interpretation of the Results in terms of meaning and application. Results should not be repeated. Computations or extrapolations that may help explain the results may be provided. Limitations of the study should be defined and suggestions for future research should be included. References that support or negate explanations provided are appropriate.

Conclusion—The findings in terms of implications for the practice of prehospital, emergency, and/or disaster medicine should be summarized in a few sentences.

2. **Special Report**—Describes some aspect of our science or activities that provide information necessary for the progression of the science. The *Introduction* should highlight the problem being addressed and the reasons that it needs to be addressed. Sections of

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