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Study/Objective: The objective of this study was to conduct a retrospective observational audit of medical toxicologic cases presenting to Princess Marina Hospital (PMH) in Gaborone, Botswana.

Background: The burden of disease, secondary to toxicologic insults in Africa is difficult to assess. No reliable epidemiological data exists due to poor documentation, scarce resources for reporting, and diagnostic challenges. Only 10 of 58 African countries have Poison Control Centers to direct care and compile epidemiologic data. Botswana currently does not have a poison control center.

Methods: A database was created to record anonymous data on all patients with toxicologic insults presenting to the Emergency Department (ED) at PMH from January 1, 2016 to June 30, 2016. The de-identified variables extracted from patient files included age, date of presentation, sex, comorbidities, vital signs, treatment received, disposition, HIV status, and severity assessment using the Acute Physiologic and Chronic Health Evaluation II (APACHE II) and Poisons Severity Score (PSS).

Results: In total, toxicologic complaints comprised about 2% of patients presenting to the ED at PMH during this time period. The most common complaints were paraffin, paracetamol, ibuprofen poisonings, scorpion and snake bites. The percentage of female toxicology patients varied proportionately with age with 38% female from age 0-15 to 67% from age 16-55. The percentage of poisonings that were intentional also increased with age with 6% intentional between ages 0-15 to 83% between ages 16-55. The route of exposure was overwhelming oral (86%) and approximately 60% of patients were admitted to the hospital for further monitoring.

Conclusion: This descriptive study is important for directing the allocation of resources towards medical toxicology, prevention campaigns, patient and medical education, and clinical guideline development, with the goal of ultimately improving patient outcomes. This study is also important in furthering the field of clinical toxicology research.

Prehosp Disaster Med 2017;32(Suppl. 1):s206-s207
doi:10.1017/S1049023X17005398

Integral Care to Ground Transportation Accident Victims Attributed by Hospital Emergency Nurses

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Study/Objective: Qualitative research Objective: Understanding, from the nurses' perspective, the meaning of the integral care to the ground transportation accident victims.

Background: The integral care to the ground transportation accident victims does not restrict itself to the usage of therapeutic resources, it involves social and technical conditions. Presents deep roots in the social, economic and political structures.

Methods: It's a qualitative research supported on the presupposed of the Grounded Theory was adopted and as a theoretical reference to the Integrality in Health. The data were collected from June to September 2015 through semi-structured interview with 36 health professionals from the emergency sector of a public hospital in Santa Catarina.

Results: The analysis of the data has resulted in the central category: Promoting the integrality in the attendance to the ground transportation accident victims. The nurses have expressed the dimension of the integral care in an assistance model centered in the offer of services that attend partially the citizens' necessities. The participants realize that as inerrant difficulties: the non-restrict access; the lack of intersectoral articulation, bad conditions of work, excess of patients; having critical patients next to stable ones; scarcity of resources; overload in the team; young professionals with a few clinical backgrounds and the non-continuity of the care.

Conclusion: It's indispensable that the actions of these professionals transcend the hospital environment. For this, there is the necessity of interlocution among the services, visualizing thus the materialization of the Health Attention Nets, which are the primary cares, the specialized attention (outpatient and inpatient) and urgency and emergency care. The study points to the necessity of structural reformulation in the care process and conceptual on the assistance to the victims of these accidents, which will reflect on the way of see and act of these professionals involved in this attendance.

Prehosp Disaster Med 2017;32(Suppl. 1):s207
doi:10.1017/S1049023X17005404

Context of the Care to the Ground Transportation Accident Victim in Hospital Emergency

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Study/Objective: Qualitative study, supported on the Grounded Theory and in the Health Unique System Integrality principle, which the goal was to understand how the integral care to the ground transportation accident victim is organized in a hospital emergency service.

Background: The performing of an integral care to the ground transportation accident victims does not restrict itself only to the usage of therapeutic resources, but it also involves social and technical conditions. This phenomenon presents deep roots in the social, economic, and political structures, as well as in the individual consciousness, in a dynamic relation among the involved people.

Methods: Data were collected in a hospital of Florianópolis/Santa Catarina, from June to September 2015, through interviews with 36 health professionals. The analysis of the data was based on a theoretical codification which identified the phenomenon “Promoting the integrality on the attendance to the ground transportation accident victims.” This phenomenon has emerged from the integration of five categories and 13 sub-categories, according to Strauss and Corbin’s (Grounded Theory) paradigmatic model. The analysis of the category context outlined the scenery of the assistance to these victims.

Results: The results revealed that the organization of flux attendance to these aggravations to the integrality light is still incipient. It has been verified that the saturation of the operational limit and lack of inter-sectoring are the factors that impact in this care. It has been evidenced that the necessity of capacitance of the professionals to give the integral care, because a little bit is done in these event prevention fields.

Conclusion: We can conclude that the organization of the integral care to the participants of this study is partially comprehended, and the care is not contemplated in its whole magnitude of what it requires improvements on the performed actions.

Prehosp Disaster Med 2017;32(Suppl. 1):s207–s208

doi:10.1017/S1049023X17005416

Health: Seeking Behavior of Patients Who Died of Rabies in the Komfo Anokye Teaching Hospital (KATH)

Emergency Department in Ghana

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Study/Objective: This study seeks to describe cases of human rabies in relation to health seeking behavior of rabies patients who reported to the Emergency Department (ED) in January 2015 to January 2016 in Ghana

Background: Human rabies is a neglected preventable tropical disease of the public health interest, with a case fatality rate of almost 100%. There are several interventions available for the control and eradication of human rabies offered by the World Health Organization and its partners. The health seeking behavior of patients bitten by potentially rabid dogs will influence their outcome.

Methods: This study is a retrospective chart review of all patients who presented to the Komfo Anokye Teaching Hospital Emergency Department and were diagnosed with Human Rabies based on ICD 10, from January 1, 2015 to January 1, 2016.

Results: Nine (9) patients presented with Human rabies and all died off. All bites were from dogs with majority (67%) being stray dogs. Majority of the patients were males (78%). Eighty-nine percent were between the ages of 20 years and 60 years (8 out of 9). Fifty-six percent of the cases did not seek initial medical treatment after the dog bite, 33% went to the hospital, injected with anti-tetanus toxoid and asked to observe the dogs. One case (11.1%) was given no treatment even though initial medical treatment was sought.

Conclusion: There is the need to further study factors that will ensure people who get bitten, that they receive prompt and

appropriate treatment to reduce the economic burden of human rabies.

Prehosp Disaster Med 2017;32(Suppl. 1):s208

doi:10.1017/S1049023X17005428

AAR and IP: Effective Tools to Improve Public Health

Preparedness

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Study/Objective: Describe the utility of incorporating properties of a public health investigation into an After Action Report.

Background: Integrating public health practice into emergency response operations from recommendations in After Action Reviews (AARs), and implementing standardized practices in public health emergencies.

Methods: Literature review.

Results: Preliminary Findings: - There is a need for a clear, comprehensive, uniformed data system which intersects the Incident Command System (ICS).

- Improved performance measures resulted in group discussion, interactive exercise, and hands-on practices in conjunction with FEMA IS-130 with participants in the healthcare field.
- Drills/exercises should be accompanied by clear performance measures.
- Significant decrease in public health practitioner participation in plans and protocols, communication and incident command and other investigations support (ie. surveillance systems).

Conclusion:

- Investigate the utility of incorporating components of a public health investigation into an After-Action Report/Improvement plan.
- Raise awareness of integrating an emergency response planning tool into the public health and healthcare sectors, to enhance response capabilities.
- Develop innovative methods for future collaboration and standardization of emergency preparedness best practices.
- Improve public health emergency preparedness by developing a tool which integrates the emergency management operational objectives, with the public health components of investigating an outbreak.

Prehosp Disaster Med 2017;32(Suppl. 1):s208

doi:10.1017/S1049023X1700543X

Community Awareness of Stroke, Hypertension and Modifiable Risk Factors for Cardiovascular Disease in

Nkonya-Wurupong, Ghana

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