

Airport Rescue Services were well-prepared to manage the severe airline accident. When conditions are in favour of rapid transport to hospital, triage and more advanced medical management could be more adequately performed in a hospital, but the co-ordination of ambulance transports remains important. Communication with the dispatch centre is in similar situations important. The hospital system in Taipei, including the large trauma and burn centre, seems well-prepared to handle a mass casualty situation.

**Key words:** airline; airport; burns; casualties; co-ordination; crash; deaths; hospitals; injuries; rescue; response; transport  
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#### **Training Course in Human Resources: Descriptive Analysis of Traffic Accidents During Year 2000**

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**Introduction:** Of the demands required of the Centro Informacion y Coordinacion de Urgencias de Castellon (CICU), the cases related to the traffic accidents make up 17% of the total of emergencies. In addition, they are emergencies that usually take place in another type of nonhealth sector. Therefore, it is interesting to know the profile and data that are responsible for this health care demand.

**Objective:** To conduct a descriptive analysis of the traffic accidents in the province of Castellon during year 2000, classified according to Galeno as emergencies.

**Methods:** A cross-sectional, descriptive study with a sample of 936 accidents gathered from 01 January through 31 December 2000 was used. A worksheet was created (in the Excel, Microsoft, Inc., Redmond, Washington USA) that contains the following variables: (1) with respect to the wreck, the location of the accident, date, day of the week, and hour of the alert; and (2) with respect to the wounded, the number of injured in each wreck, age, gender, evaluation, diagnoses, and resources used in providing the medical assistance.

**Results:** Traffic accidents caused 17% of the total number of emergencies taken care of during this period. The months with greater frequency were April, July, and August. Of 461 accidents studied, they occurred on the weekend, including Friday, Saturday, and Sunday. The hourly distribution between morning, evening, night, and dawn indicates that greater percentage happen in the afternoon, with a clear peak in frequency between the 18:00 h and 20:00 h with 58 accidents; 40.8% of the accidents take place in an urban zone and environs; and 59.2% on the roads (highways) of the urban zones: highway (freeway) 133 accidents; state roads (highways), 231; and roads (highways) of local or regional importance, 159.

**Key words:** accidents; analysis; frequency; profile; traffic  
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#### **Assessment of Hospital Disaster Plan Conferences in Turkey: A Report of the Emergency Medicine Association of Turkey (EMAT)**

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**Objective:** To determine hospitals' general adequacy and preparedness in response to disasters a year after the 17 August, 1999 earthquake, and to evaluate the need for comprehensive hospital disaster plans in Turkey during the Hospital Disaster Plan Conference Series.

**Methods:** From 25 September 2000 to 09 October 2000, nine prepared standard conferences were organized by EMAT and Emergency Medicine Research International (EMRI) in seven different cities. Organisations of the conferences was done by EMAT Secretary and the local Turkish Physicians' Association offices. Professionals who work in their hospital's disaster teams, administrative offices, clinical services (doctors, nurses, etc.), and ambulance services were invited to the conference. The conferences were organised for participants from university, state, and insurance hospitals. Postconference questionnaires containing 20 questions were given to all participants.

**Results:** The conferences were attended by 373 professionals. The participants were group into the following categories: (1) doctors, 114 (31%); (2) nurses, 96 (25%); (3) paramedics, 49 (13%); and (4) others 114 (31%). Of these, 25% said "no" to "Does your hospital or facility have any disaster plan?", Thirty-four percent of participants chose "not sure" for the same question. Ninety-six percent of participants said "yes" to, "Would you like to have a role in your hospital's or facility's disaster plan?" Ninety-three percent of participants said "yes" to "Can the Hospital Disaster Plan Program be effective on your hospital or facility?" Forty-nine percent of participants said that their hospitals were "not ready" for a disaster.

**Conclusion:** Health care professionals are the cornerstones of any disaster plan. Most of the hospitals visited during the conference series don't have organized hospital disaster plan one year after the Marmara earthquake. However, professionals want to have a role in any new disaster plan. We concluded that while some hospitals are not prepared to deal with any new disaster, this Hospital Disaster Plan (HEICS) can form a solid basis for new guidelines that are easily applicable to every hospital in the country.

**Key words:** disaster; disaster plan; hospitals; planning; preparedness

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