Conclusion: Disasters require policies which optimize resources in the event of a disaster, as well as multidisciplinary teams that are properly trained, and specific material for use in the immediate interventions.
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(29) Emergency Medical Technician/Paramedic Training in Europe: An Integrated Level of Training is Yet to be Seen

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Introduction: Currently, there are many different systems of ambulance services in Europe; there is no integrated level of training for the paramedical specialist staff. In countries with an emergency doctor system, most levels of training of these staff members are bad or insufficient. In comparison, the level of training with paramedic systems seems good or excellent.
Methods: Lectures were presented on the subject of ambulance services during several conferences in Europe. Trainers and members of professional associations were questioned in person or by telephone communication about their respective level of training during these conferences. Furthermore, ambulance trainings have been evaluated and analyzed during the licensing processes. The development of special lessons for ambulance staff in several European countries was compiled in this study.
Results: The professional guidelines of the different countries have developed rapidly in the last years; however, the extent of training provided has not always met the requirements. This often obstructs the possibilities in developing special professions. In countries with large numbers of volunteers in the public ambulance service, the training level often is low.
Conclusions: In Europe, there is no integrated regulation of emergency medical support by paramedical specialist staff. External influences are guiding the development of training and skill levels. This may result in problems for the European licensing processes and may make the realization of European guidelines to mutual acceptance of diplomas more difficult.
Keywords: ambulance; emergency medicine; Europe; paramedic; training
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(30) Disaster Plan Exercise in a Military Medical Academy in Turkey, 2005

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The greatest potential causes of disasters in Turkey are earthquakes. Due to the massive numbers of injured persons that occur after earthquakes, a large number of injured are taken to the hospitals at the same time. Triage is performed in line with the prepared "Hospital Disaster Plans": urgent patients are admitted to the hospital with priority, which helps to decrease mortality and morbidity.

In June 2005, a Hospital Disaster Plan (HDP) Exercise was organized in Gulhane Military Medical Academy Training Hospital, Ankara. The subjects for the simulation were students from the Military Faculty of Medicine, Nursing High School, and Vocational High School of Health. Make-up for the injuries was done using a moulage kit and make-up kit. A triage team and area officials were selected from the volunteer hospital personnel. According to the scenario, after the earthquake, 1,000 injured persons were transported to the hospital via land and air ambulances. The HDP was activated. According to the scenario, 30 injured with the suspicion of chemical contamination were subjected to the decontamination procedure. The decisions of the triage team were evaluated after the exercise through an examination. After the exercise, a feedback meeting was convened and the lessons learned were assessed. It has been suggested that such exercises will enhance the success of the organizations in hospitals receiving mass injuries.
Keywords: drills; earthquakes; hospital; preparedness; triage
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(31) Training Course for the Iraq Management System for Emergency Medical Services

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Introduction: In Iraq, number of injured patients are increasing due to the aggravated security. In addition, the emergency medical services system that collapsed during the war, still does not function. There is a deficiency of emergency medical specialists and paramedics. Above all, improving the management of the emergency medical services system, training emergency medical specialists and paramedics is urgent.
Objective: The purpose of this study was to establish guidelines and create an effective management system for prehospital care, hospital care, and disaster medicine in each Iraqi prefecture. Therefore, 24 emergency physicians were invited to provide emergency medical services management system training.
Methods: In order to understand the present conditions/problems of the Iraqi system, participants learned about the emergency medical services management system in Japan, and established a plan of action to build a basic emergency care system in each prefecture of Iraq. Two four-week classes were provided in Japan (2006 September, December).
Results: Based on the results of the training, an action plan for a basic emergency medical services system was established at the Ministry of Health and at each prefecture level.
Discussion: A follow-up of the results of the training should be conduced in the future. In addition, the means to perform an action plan while the security problem is not resolved, remains an issue.
Keywords: emergency medical services; Iraq; management; plan; security; training
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