protocols for training and further studies of resilient behaviors in disaster management teams.

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Revised Hospital-MIMMS Course for Japan

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Introduction: HMIMMS (Major Incident Medical Management and Support: The Practical Approach in the Hospital) has been introduced by ALSG (Advanced Life Support Group, Manchester, UK) and developed for many countries for preparing to accept huge numbers of casualties at a hospital during major incidents. The original HMIMMS course has been held in Japan since 2007, produced over 1,200 providers. Japan has a crucial history of natural disasters, earthquakes, tsunamis, and typhoons often resulting in extensive damages to infrastructure and communications.
Aim: The MIMMS-JAPAN and the Japanese Association for Disaster Medicine have joined to plan to revise the original HMIMMS course from the point of view of the difference of the type of disaster.
Method: By the permission of ALSG, two subjects were added "Hospital Evacuation" and "Business Continuity Plan" as lectures, workshops, and tabletops to the original HMIMMS course. Before attending the course, students were required to watch e-learning for deeper understanding and time-saving. Total program was organized into two days.
Results: Main points of modification are to:

1. Replace a system peculiar to the UK with a Japanese system.
2. Add unique contents of a Japanese disaster.
3. Add the important subjects especially in Japan.
4. Modify the presentation slides to understand easily for Japanese students. But the fundamental concept that hospital functions upon 'CSCATTT' is strictly preserved.

Discussion: Newly revised HMIMMS course will start in 2019 for Japanese learners. Many reflections must be accumulated and further revisions will continue.

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Risk Mapping of Road Traffic Incidents in Greater Kampala Metropolitan Area for Planning of Emergency Medical Services

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Introduction: Compared to high-income countries, low and middle-income countries (LMICs) bear the heaviest brunt of road traffic incidents (RTIs), which is a serious public health and development burden. Like other LMICs, Uganda has been experiencing a worryingly high burden of RTIs and their associated impacts with the highest number of all the total registered RTIs in Uganda registered in the Greater Kampala Metropolitan Area (GKMA). This places a tremendous demand on the few existing emergency medical services (EMS) to adequately respond to those affected.
Aim: To aid in better planning of EMS for the victims of RTIs by using risk mapping of RTIs in the GKMA.
Methods: A mixed methodological approach involving a systematic review, Delphi panel technique, retrospective data analysis, and a cross-sectional method.
Results: With Uganda progressing forward as envisaged in its "Vision 2040," the GKMA, which is the country's political and socioeconomic epicenter, is experiencing significant changes in terms of population growth. This has significantly increased RTIs, which puts pressure on the pre-hospital emergency care for those affected unless necessary actions are taken.
Discussion: Therefore, the road safety vis-à-vis injury prevention measures, which are needed to reduce the burden of RTIs, should be multifaceted in nature so that they closely correlate with the ongoing dynamics that cause them, particularly in the GKMA which experiences the highest number of RTIs and Uganda as a whole. The WHO "Safe System Approach" is desirable for this purpose as it represents the most appropriate approach because it is broad enough to comprehensively manage any of the ongoing dynamics (political, socio-cultural or economical) that are known to contribute to RTIs.

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The Role of the Nurse Disaster Preparedness Coordinator at a Large Suburban Teaching Hospital

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Introduction: Mass casualty incidents, whether man-made or natural, are occurring with increasing frequency and severity. Hospitals and health systems across the United States are striving to be more rigorously prepared more such incidents. Following a mass shooting in 2012 and significant growth and expansion of our hospital and health system in the following years, a need was identified for more staff to support preparedness efforts.
Aim: To discuss the roles and responsibilities of Nurse Disaster Preparedness Coordinator (NDPC), a dedicated position in the Emergency Department (ED).
Methods: The role of Nurse Disaster Preparedness Coordinator was implemented in 2016, is a part-time position in the Emergency Department and reports to the ED Manager while working closely with the ED Director of Emergency Preparedness and the hospital Emergency Manager. The role addresses all areas of the emergency

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