

(SAR) service, as designed by the United Nations, so that “wherever you sail or fly, there will be a SAR service available for when needed”.

This presentation will give a brief oversight of the UN SAR system, as well as the specific challenges encountered when working in the harsh environment of the sea.

Keywords: education; maritime rescue; Maritime Rescue Institute; search and rescue; training

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Medical Services Curriculum Beyond Borders

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Introduction: Medical Teams International’s (MTI) Emergency Medical Services (EMS) program began in 2001 with a focused training and educational effort to reduce secondary injury resulting from traumatic incidents in the developing world.

Methods: The EMS educational program has three goals:

1. Provide EMS curriculum contextualized and translated into the languages(s) of the country;
2. Utilize a Train-the-Trainer method of adult education to increase local capacity and provide a foundation for program sustainability; and
3. Standardize and integrate the EMS curriculum into the national health education system.

Results: The primary aim of the EMS training program is to provide access to EMS educational materials to project areas where they previously have been non-existent. The *MTI Emergency Medical Pre-Hospital Care Worker International Basic Level Text* was written following the US National Highway Traffic Safety Administration’s guidelines for the emergency medical technician-basic level. It is designed for caregivers of all levels to gain an understanding of basic prehospital emergency medical care concepts. Medical Teams International encourages others to copy, reproduce, or adapt any or all publications, provided that the parts reproduced are distributed free or at-cost.

Conclusions: Currently the textbook has been translated into: English, Russian, Uzbek, Spanish, Vietnamese, Khmer, Tamil, Sinhalese, and Romanian.

Keywords: curriculum; education; emergency medical services; international; training

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An Evidence-Based, Comprehensive Triage and Resource Management Process

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Introduction: The National Incident Management System was developed to ensure that a comprehensive preparedness and response system was available for natural and human-made mass-casualty incidents. Unfortunately, the triage and resource allocation processes remain subjective and based in dogma. The need for a comprehensive and inclusive system requires development if lives are to be saved and valued resources are to be utilized effectively.

Methods: The various aspects of disaster preparedness and response components were determined and evaluated with the focus remaining on patient outcome. Resource allocation, type of trauma, burns, patient age, transport mode (ground or aircraft), destination determination, definitive care needs, and medical co-morbidity factors were measured.

Results: A comprehensive triage methodology and decision-support process has been developed within the constraints of evidence base and patient outcomes. This comprehensive methodology not only provides a solution to the shortcomings of current triage protocols and processes, it provides a measurable and reproducible system specific to local and regional medical and physical resources.

Conclusions: Comprehensive triage is modeled precisely as an evidence-based, outcome-driven method that maximizes expected the number of survivors in consideration of resources. This methodology provides life-saving, resource conserving, and operational advantages over current methods.

Keywords: disaster; patient outcome; resource management; triage

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A Literature Review of Disaster Nursing Competencies in Japanese Nursing Journals

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Introduction: Competency is an important concept used for determining health professional capability. This paper investigates evidence of the development of this concept in disaster nursing through an analysis of Japanese professional journals between 2001 and 2008.

Methods: The literature research was conducted using the database Ichu-shi version 4. Keywords were sought that captured the concept of competency, a term not in common use in Japanese literature. Twelve keywords were chosen: disaster; capability; education; practice; licensure; ability; function; prevention; response; planning; emergency; and disaster nursing.

Results: One hundred and twenty articles were found through combinations of the keywords. Articles not discussing the disaster nursing context were excluded. As a result, 46 articles were chosen for analysis. Only one article was found that discussed core competencies for disaster nursing. The 46 articles were categorized into seven themes: practice capability; professional preparedness; community preparedness; curriculum for training; establishing discipline; and investigating logistics issues.

Conclusions: The themes demonstrate how disaster nursing competency is being conceptualized in the Japanese scientific community. Nursing curricula must address these concepts to establish disaster nursing competency in nursing education. The similarity of competency concepts with those of other health professionals was noticeable and inter-disciplinary approaches to curriculum development should be considered.

Keywords: accreditation; competency; credentialing; disaster nursing; Japan; literature

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