DO ORGANISATIONAL CHANGE IN OUT-OF-HOUR EMS-WIDE MULTIFACETED IMPLEMENTATION OF HEMS - SATISFACTION OF PARAMEDICS AND PATIENTS IN THE STUDY OF A NATURAL EXPERIMENT

1,2OS Nystad*, 3,4HI Breidablik, 3,4,5J Reisli, 3,5Å Runaa, 6O Østergård, 7E Zakariassen. 1Department of Research, Norwegian Air Ambulance Foundation, Drabak, Norway; 2Research Group for General Practice, Department of Global Public Health and Primary Care, University of Bergen, Norway; 3Centre of Health Research, Farne Hospital Trust, Faroe, Norway; 4Faculty of Health Sciences, University of Stavanger, Stavanger, Norway; 5National Centre for Emergency Primary Health Care, Uni Research Health, Bergen, Norway; 6Department of Anaesthesia and Intensive Care, Haukeland University Hospital, Bergen, Norway.

Aim Over the last decades out-of-hour services in Norway have been centralised to cover larger geographical areas, resulting in longer response times for the on-call GP. Reports indicate an unintended increase in requests of helicopter emergency medical services (HEMS) as a result. We aimed to investigate alteration in the requests for HEMS and NACA-score of the patients transported.

Method In 2009 nine municipalities in the county of Sogn og Fjordane relocated all local out-of-hour services into one large casualty clinic (SYS-IKL). We included all primary HEMS requests in the county from 2004–2013 and compared missions within the area of SYS-IKL to missions in the rest of the county.

Results Preliminary data included 7310 requests. Within SYS-IKL requests were 4.4 per week in the period. Completed and cancelled requests were 3.0 and 1.3 per week before 2009 compared to 2.7 and 1.6 per week after 2009. Outside SYS-IKL requests were 8.9 per week before 2009 and 10.4 per week after 2009. Completed and cancelled requests were 5.1 and 3.4 per week before 2009 compared to 5.5 and 4.6 per week after 2009. Mean NACA-score within SYS-IKL was 3.98 and 3.87 (p=0.115) compared to 3.78 and 3.77 (p=0.786) outside SYS-IKL before and after 2009, respectively.

Conclusion Preliminary results did not confirm the hypothesised increase in use of HEMS or reduced NACA-score due to centralization of out-of-hour services. However, further statistical analyses are required.

Conflict of interest None

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SATISFACTION OF PARAMEDICS AND PATIENTS IN THE USE OF METHOXYFLURANE (PENTHROX) FOR THE TREATMENT OF PAIN

12J Karjanlaiti*, 3M Tölli, 4V Lahola, 5S Länkimäki. 1Centre for Prehospital Emergency care, The Hospital District of South Ostrobothnia, Seinäjoki, Finland; 2Vocational Education Centre Sedu, Seinäjoki, Finland.

Aim The objective of this study was to evaluate the satisfaction of paramedics and patients in the use of Penthrox in pain management.

Method The material was collected by using a questionnaire between Dec 2016-Dec 2017 in the Hospital District of South Ostrobothnia. Penthrox was given to 68 patients and the paramedics recorded both their own answers and those of the patients in the questionnaire.

Results The mean satisfaction of the paramedics in the use of Penthrox was 7.85 on a scale 1–10 with a standard deviation (SD) of 2.36 (n=61). A total of 40% of the respondents scored their satisfaction as 8–10. The mean satisfaction of the patients was 8.04 with SD of 2.52 (n=49) and 51% of the patients rated the satisfaction to be 8–10. At baseline, the average pain of 65 patients was 8.09 with SD of 1.45. The average pain at 10 min after dosing was 5.42 with SD of 2.45 (n=64). Pain estimated at 10 min after dosing, a statistically significant difference was observed between pain at baseline (p<0.001). Among the adverse effects, nausea occurred in one (1.47%) and haemodynamic problems in two (2.94%) patients (n=68).

Conclusion Based on this study, most of the paramedics and patients were satisfied with the use of Penthrox in the treatment of pain. Penthrox relieved pain in a statistically significant manner and among the adverse effects, the occurrence of nausea and haemodynamic problems was limited.

Conflict of interest None

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