

EM CARE

Towards saving lives and bringing hope



CALL 108
EMERGENCY
• MEDICAL • POLICE • FIRE

Spreading... **SMILE**

Partnering States and Union Territories



Towards Saving Lives and Bringing Hope...

Launched on 15th August 2005 in Hyderabad and expanded to 2 Countries
In India 15 States and 2 Union Territories.



74,115 CALLS ANSWERED EVERY DAY



22,010 EMERGENCIES RESPONDED PER DAY FLEET OF 7,387 AMBULANCES BY TRAVELLING DISTANCE OF 10,12,118 KM PER DAY 7,82,38,585 EMERGENCIES RESPONDED



38,88,735 LIVES SAVED SINCE INCEPTION. 5,53,771 DELIVERIES ASSISTED BY EMTs.



GVKEMRI's COVID19 warriors' march may be the best in testing times

Between March and May months, GVKEMRI continued to serve COVID19 pandemic as front line warriors, which will be recognized through history. By the end of May over 250,000 covid19 beneficiaries were served in our 108 ambulances. Workplace and transport guidelines of governments and multiple internal advisories enabled streamline of our services and work places.



International Women's Day was celebrated on 8th March with the theme of 'I am generation equality: Realizing Women's Rights'. Across the organization women associates were recognized and lauded for their contributions. Over 55 per cent of the beneficiaries are women under various projects at GVKEMRI. 2nd April was celebrated as EMT Day. No gatherings and functions were held due to restrictions. But EMTs were recognized and saluted for their pivotal role. New norms that EMTs need to adopt and implement in different phases of pre hospital care viz., towards scene, PPE, on-scene, en-route, hand-over, documentation, disinfection were reemphasized on this day. World Health Day was celebrated on 7th April with a slogan of 'support nurses and midwives'. Hundreds of nurses are working in our organization in ambulances, training department and in ECCs.

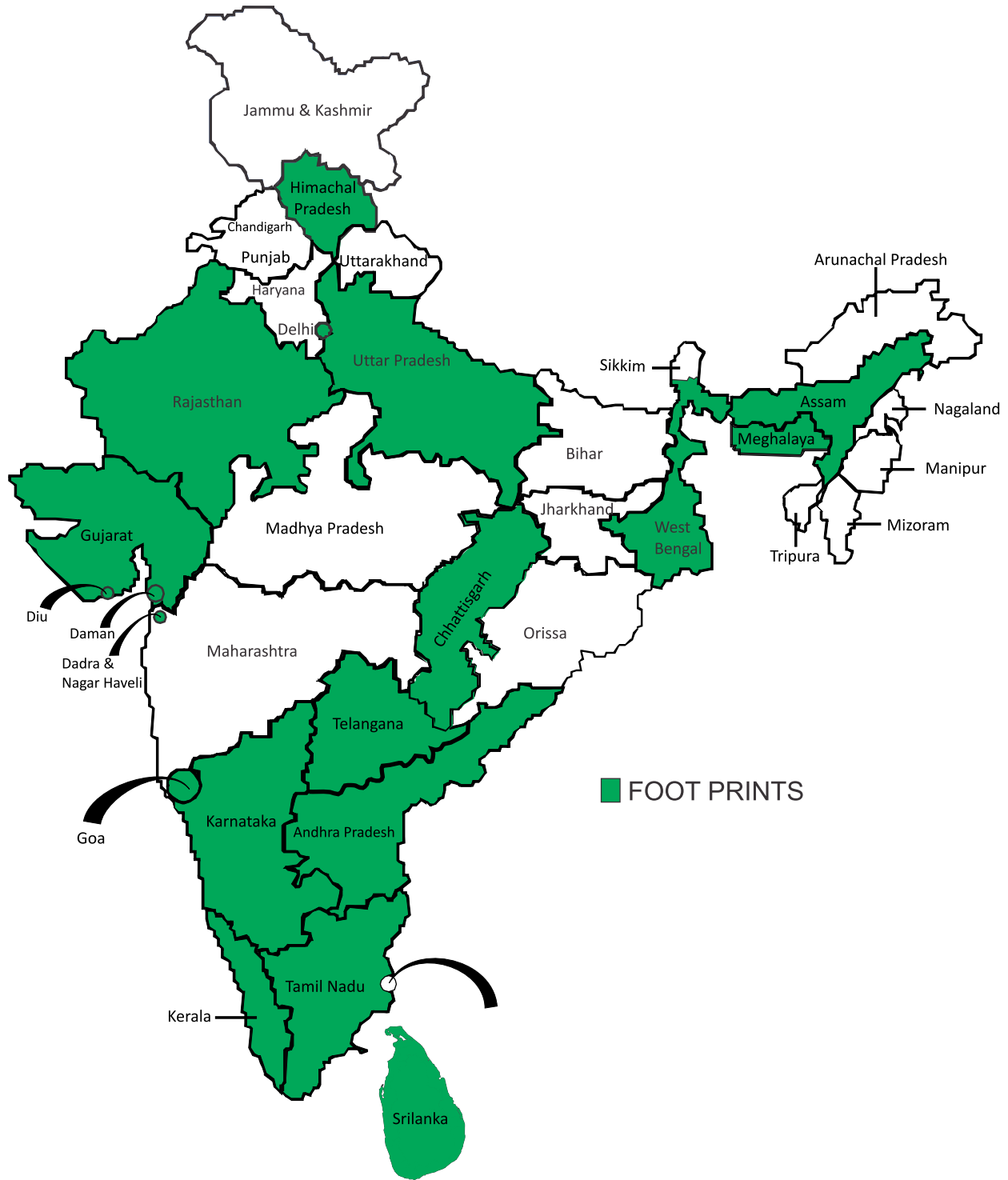
In spite of the complexities arising out of COVID19 pandemic and challenges to our services, on 27th March two hundred new ambulances were inducted into 108 GVKEMRI operations in Tamil Nadu in a serene function with limited participants. Union Territories of DD/ DDH have successfully completed the 8 years of services on 10th April.

Olympic Champion and international badminton player Ms PV Sindhu has released an exclusive and impressive audio-visual message highlighting the brave and benevolent services of our organization, in particular, our front line ambulance staff in COVID19. In addition, she has also mentioned the other important services offered by GVKEMRI. Being not only a popular sports personality, PV Sindhu is also a youth icon in India and hence her message has helped to promote the brand GVKEMRI to nook and corner.

I want to put on record the glorious services of ambulance staff from the three states of March - Tamil Nadu - March, Goa - April & Meghalaya - May which won the 108 saviour awards.

Be safe and be strong.

With best wishes
K. Krishnam Raju
DIRECTOR - GVK EMRI





108 attends over 2,50,000 calls per day and 97% calls gets picked-up before 2 rings.

Aiming to reduce the neonatal mortality rate, GVK EMRI has launched Neonatal Ambulance equipped with all the facilities to shift newborns to emergency care.



Neonatal Ambulance



Drop-back Ambulance

To reduce infant & maternal mortality rate, "Drop-back Ambulances" are being inducted into service to shift mother and new born babies to their home in a sterile condition.

Specifically targeted to reach the people of rural areas, "Mobile Medical Units" meets the healthcare needs of individuals who may not have transportation or access to hospitals, clinics or medical offices.



Mobile Medical Unit (MMU)



Boat Ambulance

For quick response to medical emergencies in riverine areas and during floods, GVK EMRI has introduced "Boat Ambulances".

Dedicated for providing Inter Facility Transfer (IFT), these ambulances shift patients from one Hospital to another in case of emergencies.



Inter Facility Transfer (IFT)



Doli-palki

To access hilly terrains where there is minimal or no road connectivity, "Doli-palki" is a novel thought conceived and implemented by GVK EMRI.

In case of any health emergency, "Call 104" is the service which provides information and advice pertaining to primary action need to be taken.



To hinder crime rate and ensure peace in the society, GVK EMRI's "Dial 100" has deployed high-end technology for analyzing calls, better information gathering, prompt response, follow up and faster information sharing across various levels.

To help women in distress and block increasing crime rate against women, "Call 181" is a new service dedicated to women needing help through counselling and reaching out.



Aiming to save animal lives and strengthen livelihoods of poor farmers in the country, GVK EMRI introduced "Animal Ambulance /Mobile Veterinary Clinics". They provide doorstep emergency veterinary care for live stock and stray animals and can shift the animal to a specialist facility if required for better care.

Physical Progress

S. No	Name of the State Government	No of Ambulances	Emergencies Since Inception	Emergencies Attended in May 2020	Deliveries Assisted by EMT since Inception	Deliveries Assisted by EMT in May 2020	Lives saved since Inception	Lives saved in April 2020
1	Telangana	358	66,24,229	41,419	56,011	338	3,00,551	4,167
2	Gujarat	624	1,12,45,431	94,130	99,950	509	9,71,024	11,797
3	Goa	52	5,27,063	5,166	887	9	40,038	432
4	Tamilnadu	995	1,03,23,973	86,556	40,905	360	7,03,278	809
5	Karnataka	711	85,74,126	66,703	52,888	132	4,66,808	1,456
6	Assam	696	50,12,433	37,511	45,346	130	1,70,797	1,241
7	Meghalaya	48	2,00,846	1,426	1,920	0	21,220	0
8	Himachal Pradesh	198	13,19,459	13,162	11,440	102	1,23,882	0
9	Diu Daman & Dadra Nagar Haveli	22	2,74,280	5,001	1,000	0	13,120	0
10	Uttar Pradesh	2450	1,57,95,453	2,43,040	98,308	110	6,15,233	10,042
11	Rajasthan	701	33,95,780	41,460	17,256	223	0	0
12	Kerala	332	85,775	19,922	19	2	0	0
13	Delhi	200	1,79,883	26,821	0	0	0	0
	National	7,387	6,35,58,731	6,82,317	4,25,930	1,915	34,25,951	29,944

****Note:** MP project completed on 20/4/2016, attended **37,82,608** Emergencies, assisted **27,505** Deliveries and Saved **98,251** Lives, Kerala project completed on **15/11/2015** attended **73,143** Emergencies and assisted **34** Deliveries and AP project completed on **12/12/2017**, attended **72,66,356** Emergencies, assisted **70,531** Deliveries and saved **2,72,891** lives. Uttarakhand Project completed on 28/4/2019, attended 13,87,711 emergencies, assisted 15,075 Deliveries and saved 33,458 Lives. Chhattisgarh Project completed on 30/11/2019, attended 20,55,075 emergencies, assisted 14,669 Deliveries and saved 58,184 Lives.
****Note:** Goa & HP Lives Saved Count since Inception is till May'19 and till Apr'19 Respectively. Live saved count has been not captured from Inception of RJ state.

Janani Shishu Suraksha Karyakram (Mother & Child)

S. No	Name of the State Government	No of Janani Ambulances as on May 2020	Janani Beneficiaries Since Inception	Janani Beneficiaries May 2020
1	Assam	235	18,73,933	15,806
2	Gujarat	355	37,44,071	89,822
3	Andhra Pradesh	279	10,96,747	23,932
4	Telangana	300	20,68,253	1,15,789
5	Chhattisgarh	370	41,43,161	41,342
6	Uttar Pradesh	2,382	3,85,97,346	2,24,095
7	Himachal Pradesh	124	2,42,388	3,630
8	Goa	4	7,085	102
9	Rajasthan	587	35,91,498	61,067
10	West Bengal	804	13,87,893	40,526
Total		5,440	5,67,52,375	6,16,111
Per Day Calculation		31,403 Dispatches/ Day		





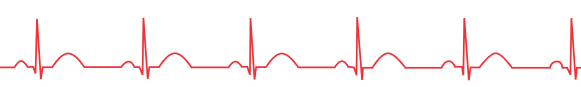
108 Saviour of GVK EMRI - INDIA

MARCH	:	TAMILNADU TEAM	-	A CASE OF PENETRATING TRAUMA	08
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MAY	:	GOA TEAM	-	A CASE OF RTA	29
MAY	:	GUJARAT TEAM	-	A CASE OF CHEST PAIN	30
MAY	:	HIMACHAL PRADESH TEAM	-	A CASE OF CHEST PAIN	31
MAY	:	KARNATAKA TEAM	-	A CASE OF ASSAULT	32
MAY	:	TAMIL NADU TEAM	-	A CASE OF BURNS	33
MAY	:	TELANGANA TEAM	-	A CASE OF TWIN DELIVERY	34
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NOT FOR PROFIT ORGANISATION OPERATING IN PUBLIC PRIVATE PARTNERSHIP MODEL



A CASE OF PENETRATING TRAUMA

MARCH 2020

On 3rd March 2020, a Good Samaritan called our 108 Emergency Response Centre for 45 years old male, who had penetrating injury as he was accidentally fallen down from the tree while working. Our Emergency Response Officer assigned the case to Bodinayakanur location ambulance for the immediate support.

On approaching the scene, it was seems to be safe and BSI precautions were followed by our EMT. On Assessment, the victim was unconscious and the wooden stick was penetrated

into his genital region through the right buttock. The victim was extricated carefully through using the extrication devices by our EMT and Pilot. Followed by, the impaled object was stabilized by bulky dressing. Wound care was given for a laceration at frontal region and also Cervical Collar was applied for the suspected C- spine injury. After stabilization of Airway, the victim was shifted into the ambulance. Vital signs were checked and observed as tachycardia, tachypnea, and hypotension for which oxygen was administered via NRBM and IV line secured.

En route to the hospital, Our EMT obtained the ERCP advice. As per the advice, IV fluids were administered and the victim was continuously monitored till ambulance reached the hospital. The victim was safely shifted to Government General Medical College and Hospital, Theni for further management.

On 48 hours follow up, the victim was found to be stable and under the surgical interventions.



REFLECTION BY EMT : YUVARAJA

It was a challenging scene case. The skill which I learnt during my training period was very much helpful for me to provide the adequate pre hospital care to the victim.

REFLECTION BY PILOT: THANGAPANDI

I understood that the victim is in critical condition and I co-ordinated with EMT to provide the pre hospital care. I moved the victim safely and quickly to the hospital.

CASE DETAILS **MEDIA COVERAGE**

AMBULANCE LOCATION : BODINAYAKANUR
 CASE ID : 842881
 DATE : 03/03/2020
 CALL TIME : 12:48 HRS
 ERCP : DR. ANBU
 RECEIVING HOSPITAL : GOVERNMENT GENERAL MEDICAL COLLEGE AND HOSPITAL, THENI.



A CASE OF RTA

MARCH 2020

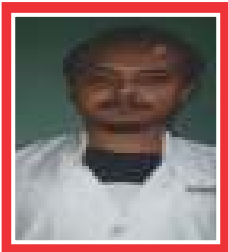
Mr. Puhar Daimary is a 35 years old business man. On 21st March 2020 at about 6:20 PM he was returning home from his daily work, when a running auto hit him from behind very forcefully and ran away from the spot. Mr. Deka fell hardly from his bicycle and he got injured on his forehead and lower extremities. Seeing the incident, some bystanders gathered around him and one of them called 108 Ambulance for help.

From the call center the case was assigned to IFT Paneri location at about 6:35 PM. The ambulance on being assigned arrived at the

scene within 10 min. EMT Promod Saikia and Pilot Ranjan Kr Das were on duty on the ambulance. EMT noticed that the patient was badly injured on his head with profuse bleeding. EMT immediately stopped the bleeding by applying pressure bandage and took him inside the ambulance on a spine board with the help of Pilot and some bystanders. EMT recorded the vitals BP-120/90, PR-78bpm, RR-1 bpm and SPO2-93 % EMT took the conference call with ERCP Dr. Santanu Tamuli and as per advice of ERCP, the airway was checked and with a jaw thrust it was opened, high flow Oxygen

was immediately connected, and NS was administered by an IV line.

Enroute the patient was stable. Bleeding was arrested by application of gauge pad. The patient was handed over to Udalguri Civil Hospital.



REFLECTION BY EMT : PROMOD SAIKIA

Patient was in much critical state. My priority was to maintain the airway of the patient. I felt happy to know that the patient was discharged from hospital and doing well now.

REFLECTION BY PILOT : RANJAN KUMAR DAS

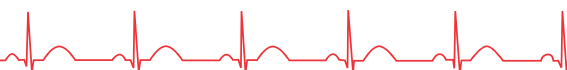
It's quite challenging to drive the ambulance inside the city area due to so much traffic in the shortest possible time. I am satisfied for being able to shift this critical patient safely to the destination hospital.



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE INSIDE THE AMBULANCE

AMBULANCE LOCATION : IFT-PANERI PS
 CASE ID : 20200300179085
 DATE : 21/3/2020
 CALL TIME : 6:35 HRS
 ERCP : DR. SANTANU TAMULI
 RECEIVING HOSPITAL : UDALGURI CIVIL HOSPITAL



MARCH 2020**A CASE OF ASSAULT**

On 20th March 2020 at 20:43 pm police called ERC saying that there is a case of bleeding injury on Konkarn railway station Margao. Case was assigned to Navelim ambulance and EMT and Pilot rushed to help the victim.

Upon arrival at the scene we saw a male patient of approximately, 22 year was just sitting next to konkarn railway police station. Patient was diaphoretic, restless, and stressed. He had profuse bleeding. On a quick trauma survey we found that patient had a deep laceration on wrist with severe bleeding .EMT suspected it has a arterial bleeding with tendon injuries.

Immediately we tried to control the bleeding by pressure bandaging, patient shifted in the ambulance and vital checked are as L.O.C Conscious, Pulse Rate 100 min, Blood Pressure 100/60 mm of Hg, RR 16 breaths/min, SpO₂ 99%.

Then EMT called ERC Dr. Navjyot advice to tie tourniquet to control bleeding , start IV fluid NS to prevent further symptoms of shock and monitor vitals every 5min.Upon proper patient history it was brought to our notice that the patient was assaulted and had injuries with sharp blade had run for his life from the actual assault scene to seek help.

According to consultation of ERC all the essential medication were given to patient in to the ambulance.

To a 48hrs follow up call, it was reported that the victim Mr. Hanumant is now out of danger and under observation in Hospicio Hospital.

**REFLECTION BY EMT : RANJITA DESSAI**

It was very difficult to control the bleeding but with Pilot help and ERC guidance patient and bleeding was controlled. Police on scene helped to shift patient in ambulance.

REFLECTION BY PILOT: SATISH TIRVIR

I am happy to know that patient is still alive I feel proud to be life savior.

**CASE DETAILS**

AMBULANCE LOCATION : NAVELIM
CASE ID : 2020000084722
DATE : 20/03/2020
CALL TIME : 20:42 HRS
ERC : DR. NAVJYOT
RECEIVING HOSPITAL : HOSPICIO HOSPITAL

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE

MARCH 2020

A CASE OF NNR

On 26th of February 2020, a call was registered at 108 call center requesting for ambulance support for an abandoned new born baby with multiple injuries all over the body being bitten by dog.

EMT Divya Barad and Pilot Jaypal Parmar left for the scene while keeping relevant equipments ready to provide all necessary Pre-Hospital care. At the same time, during their travel towards the scene, EMT advised caller not to feed her orally, and to clean and cover the baby with a clean cloth, if possible.

Ensuring scene safety and maintaining BSI precautions, the team marched towards the patient. New born was found alert, but cyanosed. EMT Divya immediately cleared her airway, as it was filled

with dirt, and assisted her ventilation by Bag Valve Mask keeping her in a neutral position. Subsequently, Baby was shifted into the ambulance.

Riding towards the hospital, BVM was continued with High Flow of Oxygenation. Altered vital signs of low Respiration Rate and low Oxygen Saturation, along with other critical information was conveyed to Emergency Response Centre Physician Dr. Zarna and Dr. Prachi at different period of time, for their online guidance, and accordingly, all essential care was given to victim. As baby got stabilized, proper wound care was done.

Baby was handed over to K T Children Hospital, Rajkot, after administering all necessary prehospital care as per the EMS

protocols. Further the baby was shifted to Amruta Multi Specialty Hospital for higher medical care as advised by the hospital staff and accorded by Smt. Remya Mohan, IAS, Collector of Rajkot.

Hon'ble Chief Minister Shri Vijaybhai Rupani visited this abandoned baby in this hospital and expressed his deep concerns after naming her "Amba". He instructed hospital authorities to deliver the best possible care to this child without considering any financial constraints.

During a follow up call, it is found that she is out of danger and doing well on her path of recovery. The hospital staff is highly satisfied for the level of prehospital care provided by team 108, which enabled them in fast recovery of this child.



REFLECTION BY EMT : DIVYA BARAD

As said-"Our greatest glory is not in never falling, but in rising every time in fall." This is my first Savior Award and I am really working hard since long to receive one. Now I am even more motivated to provide pre-hospital care to victim. This particular case involved a new born, delicate tiny baby with unstable vitals was a challenge, but with the help and continuous guidance of ERCP and knowledge I gained during my training, I could provide all the necessary care required. This case has given me a learning experience regarding the care of abandoned new born.

REFLECTION BY PILOT: JAYPAL PARMAR

I am enjoying every movement working with 108, as my efforts help to revive a victim in need. In this particular case, the abandoned new born was very critical, this made me more cautious as any of my driving skills should not interrupt with the continuous care been delivered to the new born by my EMT. I will continue to contribute in my own way to extend my help in saving every precious life in need.



CASE DETAILS

BABY'S PHOTOGRAPH WHILE RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : HOSPITAL CHOWK
 CASE ID : 20200000259754
 DATE : 26/02/2020
 CALL TIME : 08:47 HRS
 ERCP : Dr. ZARNA & Dr. PRACHI
 RECEIVING HOSPITAL : K T CHILDREN HOSPITAL,
 RAJKOT



A CASE OF TRAIN ACCIDENT

MARCH 2020

On 16th of March 2020, a 38 year old male met with a Train accident in the Bangalore district. The bystanders who witnessed the breath taking incidence activated the 108 services & requested for medical assistance & Police help. The case was assigned to our Ambulance located at Nandini Lay Out location. Our Ambulance manned with EMT – Manjula & Pilot –Ravi reached the scene .

After reaching the incident site EMT found that victim had multiple major injuries associated with Amputations of both the lower limbs. The right

leg was amputated up to the knee & left leg got amputated up to the thigh and had large portion of the skin avulsed which was associated with bleeding & multiple abrasions at multiple regions. EMT started assessment and found that the victim was semiconscious & responding to verbal stimuli. Victim was shifted into the Ambulance on with the help of Pilot & bystanders .

EMT assessed the vitals which were as follows: Blood pressure:90/70 mm of Hg, Pulse rate 134/ beats per minute, Respirations/28-breaths/per minute, Spo2 - 94%.ERCP

Dr. Ritheesh was contacted for medical directions & followed as per his Instructions.

Pre hospital Management:1. Oxygen 10lts/minute.2.IVF -RL-60-drops/minute administered. 3. Wound care. 4. Bleeding control. 5.C-collar applied. 6.splinting was done. Then the patient was shifted to Hosmat Hospital & handed over victim's amputated limbs to the receiving Doctor.

Hospital doctors appreciated our EMT & Pilot for their excellent job in saving the patient life.



REFLECTION BY EMT : MANJULA H.B

The case was critical one and it was my first experience to deal with victim who had lost both his lower limbs and I was nervous and thought it would be difficult to handle here as the crowd was huge & forcing us to shift the victim and move the ambulance on high speed . I felt very satisfied for saving life of a victim suffered sever bleeding injuries. I got good support from Pilot Ravi and I am proud to be associated with GVK EMRI.

REFLECTION BY PILOT: RAVI G.P

It gives me immense proud to save a life & it was my most memorable case I have ever came across & it was my first encounter in my service to deal with such incidence. I am proud to be associated with GVK EMRI.



CASE DETAILS

AMBULANCE LOCATION : NANDINI LAYOUT
 CASE ID : 775714
 DATE : 16/03/2020
 CALL TIME : 00:10 HRS
 ERCP : DR. RITHEESH
 RECEIVING HOSPITAL : HOSMATH HOSPITAL
 BANGALORE

PATIENT RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE



MARCH 2020

A CASE OF RTA

The 45 years old Mrs Denti Marngar, is a resident of a beautiful Markasa village in the heart of the West Khasi Hills District of Meghalaya. On the night of the 9th, March 2020, she was walking alone on the roadside. It was a busy day. As it is a sowing season, she is usually found in the field for most part of the day. Yet, she also finds time to complete her household chores daily. The night time usually is the time for her to go for shopping inside her village or to nearby villages. The stretch of the highway passing through her village is famous for high speeding vehicles. As a mother she was not contented to send her children for such errands considering the number of accidents in this highway. However, on that particular day she became the victim. While going for shopping, at around 21:30 PM, a high speeding car came from behind her, hit her and push her to the side of the road and ran

away. In the darkness of the night, no one witnessed the accident or saw the vehicle. After sometime, she was found by some passerby who took her unconscious and bleeding body immediately to the Markasa PHC which is just a hundred meters away. Immediately the doctor and the staff of Markasa PHC pull up all their strength to save her life. But her injuries were beyond the capacity of a PHC. After stabilizing the victim, they called 108 to transfer her to a higher centre.

The ERO without any delay at 22:13PM assigned the case to the Markasa Ambulance. EMT Shane Khongriat, EMT on duty and Pilot Johnsection Nongsiej, Pilot on duty, rushed to the scene to attend the case. On reaching the scene, the 108 staff quickly assessed the victim. The patient was found to be unconscious. There was a deep laceration in the left side of the

face. An amputation of the left leg below the knee. Wound care was done by the hospital. The patient was shifted inside the ambulance where the vitals were recorded. The EMT called for Online Medical Direction. He got the advice from Dr J Nongtdu. The EMT immediately followed the advice of the ERCP. The EMT gave oxygen, and continued IV fluid NS which was connected by the Markasa PHC. Spinal Immobilization was done. As it was a long journey, the patient's consciousness improved, though she was still disoriented. The patient was shifted directly to Shillong Civil Hospital.

On 48 hours follow up, the victim was still in hospital but stable in condition.

**REFLECTION BY EMT : SHANE KHONGRIAT**

It is important that patients are shifted by 108 ambulance because the condition of the patient may become worse en route. The equipments and medications present in the 108 ambulance, the presence of doctors to give advice, and the trainings that the staff have received can increase the chances of survival of the patient.

REFLECTION BY PILOT : JOHNSECTION NONGSIEJ

For us the ambulance staff, no matter how tense we were during each and every critical case we get, but it always makes us feels good to realize that one more life has been save.

**CASE DETAILS****PATIENT RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE**

AMBULANCE LOCATION : MARKASA BASE
 CASE ID : 2020000019440
 DATE : 09/03/2020
 CALL TIME : 22:13 HRS
 ERCP : DR. J NONGTDU
 RECEIVING HOSPITAL : SHILLONG CIVIL HOSPITAL



MARCH 2020

A CASE OF AMPUTATION

On 26th February 2020, at 17:06 hrs, Mr.Tipparam Yadagiri,a farmer who belonging to Marpadga village,Kondapaka mandal,in Siddipet district accidentally lost his right upper limb while using power operated chaff cutter. Seeing the injured person with crush injury and heavy bleeding, without delay the person who is standing by him requested our 108 services to help and save the victim.

On reaching the scene the EMT Mr. Mahendar, performed rapid scene size up, and found the victim Mr. Tipparam Yadagiri, a farmer, aged 45 years, on his regular routine work of chopping the fodder (Corn) for feeding cattle (buffaloes) by the using of power operated chaff cutter. He was trying to do the cutting while talking to the person

standing by. Accidentally the right hand of the farmer went into the chaff cutter up to the elbow, crushed and amputated. The person who was standing by immediately switched off the chaff cutter and pulled the victim away. As he was profusely bleeding, victim felt dizzy and had four times vomiting. EMT with the help of Pilot Mr.Kanakaraju controlled the bleeding by the using bulk of surgical pads and dressing placed with all aseptic precautions. Both EMT and Pilot shifted the victim into the ambulance, with help of automatic collapsible stretcher; recheck the wound continuously for any oozing of blood from injury site. High flow oxygen initiated. Base line vitals were recorded BP- 100/90 mm of hg, Breathing Rate- 20 Breaths/min, Pulse- 110 Beats/min and same reported to the ERCP

Dr.Naik for online medical direction, on his advice, IV fluid RL 12 drops/min initiated to victim, Injections Tramadol IM given for pain relief.

With close monitoring, the victim was shifted to Govt General Hospital Siddipet,for further surgical care and management. Our Associates later learnt from the 48hrs follow-up and further recent enquiry, due to the deteriorate condition of the victim underwent, advanced orthopedic procedure for his amputated of right upper extremity shifted to Gandhi hospital Hyderabad. Now the victim treated and discharged, came back to his home safely.



REFLECTION BY EMT : MAHENDAR

I got so much of appreciations from victim family members and my superior gave me a good feedback. This will give me moral support and energy to do more of such best cases in my future work.

REFLECTION BY PILOT: KANAKARAJU

As Pilot I have done my best duty by supporting the EMT in saving the victim's life. In spite of bad condition of the victim manage to reach the hospital safely within the short period.



CASE DETAILS

AMBULANCE LOCATION : DURAIPAKKAM
 CASE ID : 3863960
 DATE : 10/10/2019
 CALL TIME : 05:21 HRS
 ERCP : DR. ABARNA
 RECEIVING HOSPITAL : GOVERNMENT HOSPITAL, ROYAPETTAH.

MEDIA COVERAGE



A CASE OF RTA

MARCH 2020

This is a case of a road traffic accident where two victims were injured .

On the highway near Kushada village, two people of a family met with an accident. One good samaritan called 108 and requested for an ambulance.

ERC dispatched an ambulance immediately, and patients were shifted from CHC Suriyawa providing basic pre hospital care. The Medical Staff at CHC provided care to both of the patient and admitted them in the hospital .

One of the victims who got

severe head injury had developed neurological symptom, So the medical team at CHC Suriyawa had decided to shift the patient to the higher center for further investigation and management. As the patient condition became serious and ALS ambulance were called to shift the victim.

On arriving in the hospital premises, EMT evaluated the patient condition and took his vitals. His vital sign were ,Pulse 60/minute, Respiratory rate 16/minutes the blood pressure 90/60mmHg. Although patient was conscious but had altered mental status.

EMT took care of the wound, stopped the bleeding . ERCP Dr. Sumit was contacted for expert advise. As per instructions of ERCP medication and management was done, Taking the vital signs in every 5 minutes and monitoring the condition, the patient was shifted to District Hospital, Gyanpur.



REFLECTION BY EMT : ARVIND

It was an RTA case where we had shifted patient to the District Hospital Gyanpur. It was an amazing experience to handle this case to save someone live. Really I want to thank God for giving this golden opportunity to me.

REFLECTION BY PILOT: PRADEEP

Thank god for giving me a chance to live for others by serving other.



CASE DETAILS

AMBULANCE LOCATION : CHC SURIYAWA
 CASE ID : 86056
 DATE : 05/03/2020
 CALL TIME : 23:42 HRS
 ERCP : DR. SUMIT
 RECEIVING HOSPITAL : DISTRICT HOSPITAL,GYANPUR

MEDIA COVERAGE



APRIL 2020

A CASE OF RTA

APRIL 2020

On 22nd April 2020 at 23:00 pm Panjim police called Ribandar Ambulance saying there was a case of fall victim at Panjim Vishal Mega Mart. EMT Suraj Naik and Pilot Pralhad Parsekar immediately rushed to help the victim in need.

When Ambulance reached the scene, the EMT got down from the Ambulance and found the patient lying in the pool of blood. EMT began quick trauma survey and found a deep laceration on parital region of the head and multiple injuries all over the body and patient was fully smelling alcoholic.

Vitals of the patient were

checked on scene and circulation was also maintained which was very difficult task but Police and Pilot on duty helped in doing so, Vitals checked were as follows: L.O.C Semi conscious, Pulse Rate 80 min, Blood Pressure 80/60 mm of Hg, RR 18 breaths/min, SpO₂ 92%,

Then EMT called ERCP for advice on duty Dr Navjyot responded promptly who advised to start IV fluid NS and monitor vitals every 5mins. So Police on scene helped the EMT and Pilot in shifting the patient in to the Ambulance.

According to consultation of ERCP all the essential medication were given to patient

in to the ambulance.

To a 48hrs follow up call, it was reported that the victim Mr. Laxman Varandi is now out of danger and under observation in GMC Hospital Bambolim.



REFLECTION BY EMT : SURAJ NAIK

I feel happy for getting me this opportunity of saving someone's life who really in need of help. I would like to thank my Pilot, ERCP and Goa Police team for their support in shifting the patient in to the Ambulance.

REFLECTION BY PILOT : PRALHAD PARSEKAR

I am happy to know that patient is still alive I feel proud to be life savior.



CASE DETAILS

PATIENT RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : RIBANDAR
 CASE ID : 202000000125772
 DATE : 22/04/2020
 CALL TIME : 23:00 HRS
 ERCP : DR. NAVJYOT
 RECEIVING HOSPITAL : GMC



APRIL 2020**A CASE OF ASSAULT**

Mrs. Gunakanta Konwar is a 65yrs old female of Sibsagar District, on 15th April 2020 due to domestic violence, one of her relative brother attacked her with a sharp knife. Victim's neck was cut, and she became unconscious due to sudden attack, Her son called 108 Ambulance for help. The case assigned at 9.58 PM and was given to Tengapukhuri Ambulance location.

EMT done dressing in a proper way. EMT found the vitals as B P = 104 / 68 mm Hg , Pulse=90/min, SPO2= 97%. EMT also took the conference call with Dr. Santanu Tamuli.

EMT Mr. Promod Kr. Barman handed over the patient to Jaysagar Civil Hospital for further treatment.

EMT Mr. Dhruba Nath and Pilot Mr. Rubul Hussain rushed to the scene. EMT found the patient was in unconscious state with open cut wound in her neck and it was bleeding. Immediately

**REFLECTION BY EMT : DHRUBA NATH**

The case was critical one, but it was handled in a proper way in proper time

REFLECTION BY PILOT: RUBUL HUSSAIN

I properly assist our EMT sir in this case and handed over the patient in the hospital.

**CASE DETAILS**

AMBULANCE LOCATION : TENGAPUKHURI PHC
CASE ID : 20200400155566
DATE : 15/4/2020
CALL TIME : 9.58 HRS
ERCP : DR. SANTANU TAMULI
RECEIVING HOSPITAL : JAYSAGAR CIVIL HOSPITAL

PATIENT RECEIVING PRE-HOSPITAL CARE INSIDE THE AMBULANCE

A CASE OF NNR

APRIL 2020

On 5th of April 2020, a call was registered at 108 call center requesting for transferring a male newborn from Ghothwa PHC to Nootan Hospital, Mehsana. This newborn was delivered around 12:15 hours at Ghothwa PHC with meconium aspiration without Pulse and Respiration.

Visnagar location Ambulance was dispatched immediately manned by EMT Asha Chaudhary and Pilot Ramesh Chauhan. While enroute to source PHC, EMT Asha kept all relevant equipments ready which were required to provide all necessary emergency care during the Inter facility transfer. At the same time, during their travel towards the scene, EMT advised caller to continue with care.

Ensuring scene safety and maintaining BSI precautions, the team approached the baby in PHC. New born was found unconscious with complete cyanosis and meconium stained. EMT Asha immediately cleared airway and started CPR with ventilation by Bag Valve Mask keeping baby in a neutral position. Subsequently, Baby was shifted into the ambulance.

Enroute to destination hospital, CPR and BVM was continued with High Flow of Oxygenation. At intervals, vital signs were assessed while continuing CPR. Altered vital signs of low respiratory rate and low oxygen saturation, along with other critical information were conveyed to Emergency Response Centre

Physician Dr. Gopi, for the online guidance, and accordingly, all essential care was given to victim. As per advice from ERCP Dr. Gopi, inj. Epinephrine and Inj. Atropine were administered to the new born baby.

With meticulous observation and continuous emergency care, newborn baby was shifted rapidly to Nootan Hospital, Mehsana. At the time of handing over, the vital parameters had remarkably improved.

On 48 hours follow-up, it was reported that newborn has survived and the overall status has improved. Thanks to the dedicated and coordinated efforts of the '108' team that saved a precious life.



REFLECTION BY EMT : ASHA CHAUDHARY

I am really grateful as our case has been nominated to be savior for the first time. It was difficult to provide care to unresponsive newborn. Under guidance and support from ERCPs, I was able to handle this emergency during the inter-facility transfer and save this newborn with the knowledge and skills gained during my training. I really thank 108 GVK EMRI for giving me opportunity to serve.

REFLECTION BY PILOT : RAMESH CHAUHAN

I am really happy to be selected as a savior this month. It is only God who could have helped us saving the life of a newborn. It was a good team effort to save this life in danger. The training which was provided to me was very helpful in the life saving activity. I am satisfied and feel proud to be working with GVK EMRI.



CASE DETAILS

BABY RECEIVING CARE IN '108' AMBULANCE

AMBULANCE LOCATION : VISNAGAR
 CASE ID : 2020000044603
 DATE : 05/04/2020
 CALL TIME : 12:29 HRS
 ERCP : DR. GOPI
 RECEIVING HOSPITAL : NOOTAN GENERAL HOSPITAL,
 MEHSANA



APRIL 2020**A CASE OF TWIN DELIVERY**

On 29th of April 2020 a call received in the 108 emergency response center seeking medical attention for a pregnant mother aged 25 years & was in active labour. The ambulance located at Gabbur PHC was immediately assigned manned with EMT Ranjith & Pilot Vijaykumar. Ambulance reached the scene shortly which was 12km from the base location. EMT assessed the mother and found that it was a case of multiple pregnancies.

The base line vitals recorded were Pulse-88/bpm, BP-130/80 mm of Hg, RR-24/Breaths /minutes, SPO2-95%, conscious & oriented.

During transport the frequency of Labour pain increased. EMT found that the mother had progressed into crowning stage. EMT immediately conducted the delivery by utilizing 108 delivery kit. The first new born who cried soon after birth & the APGAR score recorded 9/10 of first minute.

The cord was clamped & separated & the neonate was handed over to their relatives. Later again the labour pains continued & the second baby was also delivered with all the aseptic precautions. The APGAR score of the second baby was 8/10. Both babies were kept

warm. Suction was done & after clamping & separating the cord handed over to the relatives. After about 15 minutes the placenta was delivered. There was no sign of PPH. En route- 10-IU of Oxytocin was administered IM & external Uterine massage was given. The vitals were within normal limits during handing over the patient to the CG Hospital, Gulbarga.

The hospital staff and doctor appreciated the efforts of 108 team for conducting twins delivery in the ambulance.

**REFLECTION BY EMT : RANJITH**

It was a case of Multiple Pregnancy with full term labor pain and conducting Twin babies Delivery in ambulance with the help of Pilot which was very challenging for me to deal with. Pre hospital Management was done. Pilot Vijaykumar supported during the emergency it is a great help in shifting the patient.

REFLECTION BY PILOT: VIJAY KUMAR

I am really happy to save the precious life & proud to be associated with GVK EMRI.

**CASE DETAILS****MOTHER & BABY RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE**

AMBULANCE LOCATION : GABBUR PHC
CASE ID : 1300491
DATE : 29/04/2020
CALL TIME : 06:06 HRS
ERCP : DR. RANGANATH
RECEIVING HOSPITAL : CG HOSPITAL, GULBARGA



A CASE OF EXPLOSION

APRIL 2020

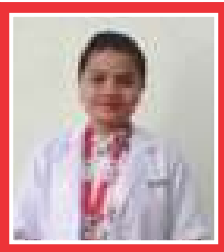
The 30 years old Kanbasar Kharsyiemlieh is a miner by profession. He is a resident of Jeidoh village, in the interior of West Khasi Hills District. He has his own stone quarry in which he also employed some of his village folks. But due to the pandemic, the whole state of Meghalaya was in a complete lock down. He too preferred to stay indoor. As it is not safe to leave the explosives in the mine, he brought them home. On the 24th April 2020, he was busy repairing the explosives in his kitchen. But due to bad luck, one of his explosives fell down from the overhead shelve into the burning fireplace. He tried to retrieve it so as to prevent the worst from happening. But it was too late. The gelatin stick caught fire and there was an explosion. The blast that is supposed to turn huge rocks to

pebbles, has no difficulty in removing his kitchen completely from existence. Fortunately, like with all other household in his village, the kitchen is usually a single room separated from the rest of the house. There was no other casualty outside his kitchen. His relatives and neighbours rushed to help him but he was unconscious. They tried their best to save his life and called 108.

The ERO without any delay at 12:39PM assigned the case to the Nongstoin Ambulance. EMT Carolyn Khardew saw, EMT on duty and Pilot Serius lawphniaw, pilot on duty, rushed to the scene to attend the case. On reaching the scene, the 108 staff with the help of the bystanders, quickly assess the victim. The patient was found to be unconscious. There were burns all

over the front side of the patient's body. The patient was shifted inside the ambulance where the vitals were recorded. The EMT called for Online Medical Direction. Shegot the advice from Dr J Nongtdu. The EMT immediately followed the advice of the ERCP. The EMT gave oxygen, and startedIV fluid NS. Wound care was done. Spinal Immobilization was done. As it was a long journey, the patient regained consciousness enroute to hospital. The patient was shifted directly to Nongstoin Civil Hospital.

On 48 hours follow up, the victim was still in hospital but stable in condition.



REFLECTION BY EMT : CAROLYNE KHARDEWSAW

Having seen the blast site, I was overjoyed to get a victim who is still alive and his condition improved enroute to hospital. The patient's party did a right thing by taking their patient to hospital and called 108.

REFLECTION BY PILOT: SERIUS IAWPHNIAW

They called us to help them. I am happy that their call was not in vain.



CASE DETAILS

PATIENT RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : NONGSTOIN BASE
 CASE ID : 2020000043298
 DATE : 24/04/2020
 CALL TIME : 12:39 HRS
 ERCP : DR. J NONGTDU
 RECEIVING HOSPITAL : NONGSTOIN CIVIL HOSPITAL



On 5th April 2020, at early morning, one of the family members of a patient called Our Emergency Response Centre and requested ambulance for a 65 year old female who is suffering from severe breathing difficulty. Emergency Response Officer assigned the case to Thudiyalur location ambulance and the ambulance reached the scene within few minutes.

On approaching the scene by EMT, scene was found to be safe and BSI precautions were followed. On assessment, the patient was unconscious and in the state of severe respiratory

distress for which high concentration oxygen was administered via Non Rebreather mask. Vital parameters were checked and observed as Tachycardia, Tachypnea, Hypertension, Hyperglycemia and severe Hypoxia.

After stabilizing of CAB at scene, the patient was loaded into the ambulance. The patient was kept in fowler's position with continuous oxygen administration and IV line was secured. En route to the hospital, Our EMT obtained the ERCP advice. As per the advice,

Nebulization given. During reassessment, the patient's saturation (spo2) was very low for which, ventilation by BVM was initiated without delay. The patient was monitored every 5 minutes till arrive at hospital and safely shifted in to Government Medical College and Hospital, Coimbatore for further management.

On 48 hours follow up, the patient was out of danger and under the intensive care unit.



REFLECTION BY EMT : BALAMURUGAN

It was a scene case and very challenging. I provided the adequate Pre hospital care as per the advice of ERCP.

REFLECTION BY PILOT: LAKSHMIKANTHAN

I am very proud to be a part of 108 ambulance services and I moved the ambulance safely to the hospital.

CASE DETAILS

AMBULANCE LOCATION : THUDIYALUR
CASE ID : 1281176
DATE : 05/04/2020
CALL TIME : 05:51 HRS
ERCP : DR. GOPINATH
RECEIVING HOSPITAL : GOVERNMENT MEDICAL COLLEGE AND HOSPITAL, COIMBATORE.

APPRECIATION LETTER



A CASE OF TWIN DELIVERY

APRIL 2020

On 10th March, our call centre received a request from PHC Bheemgal that Mrs. Banavath Bharathi, aged 26 years, 3rd gravida who has been diagnosed by ultrasound report of Twins Gestation, is suffering from labour pains, the Health Care staff requested our service to shift her to CHC Armoor for further care and treatment.

On reaching the scene, EMT Mahaboob Basha obtained obstetric history and seen the ultrasound reports that she has a twins gestation. EMT contacted ERCP on duty Dr. Aalam, as advised by him shifted into the Ambulance, placed in a comfortable position. Base line

vitals were recorded. BP 100/60 mmHg, Pulse 80/min, Respiration 14/min.

Enroute she went into labor pains, on examination crowning observed ERCP Dr Aalam, again contacted, as advised decided to conduct the delivery in the ambulance. Instructed the Pilot to stop the ambulance on the roadside and preparation was made to assist the delivery in the ambulance.

EMT supported to the emerging first baby in cephalic presentation, after the first female baby delivery, newborn care was done, Baby APGAR score-9, few minutes after delivery of the first baby the

second baby also beginning to deliver in breech presentation, head was stuck for a while, ERCP contacted for advise. After careful maneuver assisted the delivery, second female baby had no cry. Baby's APGAR score-7, after suction of the mouth, neonatal resuscitation for two three times the baby cried, continued giving Oxygen. After delivering both babies, one placenta with two umbilical cords also delivered.


Newborn care given to both the female babies. Kept them warm. Kept the mother in a comfortable position. Shifted the mother and the newborns to CHC Armoor.



REFLECTION BY EMT : SHAIK MAHABOOB BASHA

This is First time I conducted a twins delivery in the ambulance, this is an exciting experience in my 8 years of career and I feel very happy and proud to be able to comfortably conduct deliveries in future. I am very grateful to GVK EMRI for giving me such opportunity for learning.

REFLECTION BY PILOT: NARENDRA KOUTIKA
I have great satisfaction for helping the people in such emergencies. I look forward to help more people in future, day-to-day work. We are overwhelmed to hear from their families in doing such rare emergencies.



CASE DETAILS **MOTHER & BABY RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE & MEDIA COVERAGE**

AMBULANCE LOCATION : PHC BHEEMGAL
CASE ID : 114969
DATE : 10/03/2020
CALL TIME : 23:38 HRS
ERCP : DR. AALAM
RECEIVING HOSPITAL : CHC ARMOOR



APRIL 2020

A CASE OF RTA

This was a case of road traffic accident where a victim got serious head injuries. ERC received a call for an ambulance at 20:34:00 hrs for a case that need to be transferred to the higher facility hospital from CHC Rasulabad to Lala Lajpat Rai Memorial Medical College, Kanpur nagar.

Immediately an ambulance was dispatched by ERC with EMT Mr. Uttam Kumar and Pilot Mr. Kaleshwar Prasad. After arriving at scene EMT and Pilot shifted the victim in ALS ambulance, with initial assessment.

EMT measured the vitals as pulse 84/min., B.P. 111/72, Respiration rate 24 breath / min. SPO2 95%. Patient was in altered mental status and had 2 episodes of vomiting. These symptoms were indicating for serious injury to the brain. Considering criticality of the patient, EMT communicated with Dr. Ahmad for the medical advice. As per ERCP advice EMT connected oxygen supply and started intravenous fluid by inserting an IV line to patient.

Enroute EMT maintained the patient's airway and after reaching at Kanpur nagar EMT handover the victim at LLRM

hospital Kanpur Nagar.

After 48 hrs follow up, patient was found alive and improved. The ambulance team was appreciated by Pradhan of the village.



REFLECTION BY EMT : UTTAM KUMAR

The Victim was in serious condition, I have done my job under guidance of ERCP. I am very lucky that I am a part of GVK EMRI.

REFLECTION BY PILOT: KALESHWAR PRASAD

It was a long route I took care while driving on the roads with all safety measures. It was a team work that we have achieved and save one more life.



CASE DETAILS

PATIENT RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE AND APPRECIATION LETTER

AMBULANCE LOCATION : CHC RASULABAD(ALS)
HOSPITAL, BALRAMPUR
CASE ID : 32055
DATE : 16/4/2020
CALL TIME : 20:34HRS
ERCP : DR. G.P. KUSHWAHA
RECEIVING HOSPITAL : LLRM HOSPITAL KANPUR
NAGAR



MAY 2020

MAY 2020

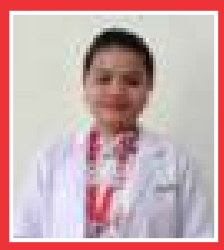
A CASE OF POISONING

Mushrooms have been the favourite food of mankind since time immemorial. They are not just palatable, but also a good source of proteins. Mushrooms cultivated in farms are comparatively safe and available throughout the year. But they are also expensive. For the villagers, everybody can have mushrooms any time they want to their hearts content. This is because mushrooms of different varieties are growing in the woods during the rainy season of the year. Many villagers used to sell the wild mushrooms in the market places and thus are also sources of livelihood. But, the tasty wild mushrooms are also famous for poisoning. Every year, in Meghalaya, hundreds of people were hospitalized because of mushroom poisoning. Not all wild mushrooms are poisonous and not all are safe. To identify the poisonous and the non poisonous mushrooms in any particular area, the villagers of that area know best as the information was passed on to them through generations. Though for others there is no difference between the poisonous and the non poisonous. There is

no way of telling until one has eaten them.

On the 24th of May 2020, four young boys were staying in their farmhouse beyond the village of Nongspung in West Khasi Hills District. That fateful morning, the youngest brother brought the wild mushroom he collected growing beneath a bamboo groove. The eldest one, a sixteen years old brother cooked them. The young boys, have collected poisonous mushrooms, unknowingly. Immediately after consuming the mushrooms, two of them started to vomit and complain of dizziness. Their aunt living nearby came to help them and on realizing that they have consumed poisonous mushrooms, she called 108. The ERO without any delay at 14:17 PM assigned the case to Nongstoin Ambulance. EMT Carolyn Khardewsaw, EMT on duty and Pilot Shalfuldance Kharsyntiew, pilot on duty, rushed to the scene to attend the case. On reaching the scene, the 108 staff quickly assessed the four patients before shifting them to the ambulance. On assessment, they found out that KyrshanLyngkhoi, a 16 years old

boy was unconscious with salivation, lacrimation, urination, diarrhea and vomiting. The youngest one, an 11 years old boy, Ailak Lyngkhoi was vomiting for several episodes, complaining of dizziness. The other two have only dizziness as they were late for breakfast that morning. Kyrshan and Ailak were then taken inside the ambulance. The vitals were recorded and the EMT called for Online Medical Direction. She got the advice from Dr J Nongtdu. The EMT immediately followed the advice of the ERCP. The EMT gave oxygen to both of them. For Kyrshan, suctioning has to be done. The patients were transported to Nongstoin Civil Hospital. The Doctor of the Nongstoin Civil Hospital on seeing the deteriorating conditions of Kyrshan, after proper interventions referred him to a higher medical facility, Shillong Civil Hospital.



REFLECTION BY EMT : CAROLYNE KHARDEWSAW

It is very a very unfortunate incident for these boys and their family. I am happy that their parents decided to call 108 and shift them to hospital. People should not hesitate to call 108 and go to hospital even during this COVID – 19 pandemic. Chances for their recovery are very high in hospitals.

REFLECTION BY PILOT: SHALFULDANCE KHARSYNTIEW

People should be very careful with wild mushrooms. They can bring disasters which can be easily avoided.



CASE DETAILS

AMBULANCE LOCATION : NONGSTOIN BASE
 CASE ID : 2020000056856
 DATE : 24/05/2020
 CALL TIME : 14:17 HRS
 ERCP : DR. J NONGTDU
 RECEIVING HOSPITAL : NONGSTOIN CIVIL HOSPITAL

PATIENT RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE



A CASE OF RTA

MAY 2020

Rupkanta Rajbongshi is a 22 years old young man. On 5th May'20 at about 3.18 PM he was returning home from his friend's home, when a running auto hit him from behind very forcefully and run away from the spot. Mr. Rajbongshi fell hardly from his bicycle and he got injured on his forehead and lower extremities. Seeing the incident some bystanders gathered around him and one of them called 108 Ambulance for help.

From the ERC the case was assigned to Tangla CHC location at about 3.23 PM. The ambulance on being assigned

arrived at the scene within 10 min.

EMT Lakhinder Mohato and Pilot Julius Daimari were on duty on the ambulance. EMT noticed that the patient was badly injured on his head with profuse bleeding from lacerated part and was in a Semiconscious state. EMT immediately stopped the bleeding by applying pressure bandage and took him inside the ambulance on a spine board with the help of Pilot and some bystanders. EMT recorded the vitals BP-130/90, PR-76 bpm, RR-17 bpm and SPO2-98 % EMT took the conference call with ERCP Dr. Santanu Tamuli

and as per advice of ERCP, high flow Oxygen was immediately connected and with proper dressing was done. The patient was handed over to Tangla CHC.



REFLECTION BY EMT : LAKHINDER MOHATO

Patient was in much critical state. I felt happy to know that the patient was discharged from hospital and doing well now.

REFLECTION BY PILOT: JULIUS DAIMARI

It's quite challenging to drive the ambulance inside the city area due to so much traffic in the shortest possible time. I am satisfied for being able to shift this critical patient safely to the destination hospital.



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE INSIDE THE AMBULANCE

AMBULANCE LOCATION : TANGLA CHC
 CASE ID : 20200500005222
 DATE : 01/05/2020
 CALL TIME : 3.23 HRS
 ERCP : DR. SANTANU TAMULI
 RECEIVING HOSPITAL : TANGLA CHC



MAY 2020**A CASE OF RTA**

It was night of 16th May '2020, Porvorim ambulance while on their way to back to base from Pilerne road to Porvorim. A call received by ERO saying that there was a two wheeler banged to a banyan tree. Immediately ERO assigned the nearest ambulance for help.

The case was assigned to Porvorim ambulance. On arrival at scene, EMT found scene surrounded with big crowd and victim had serious injuries all over the body. EMT made quick trauma survey, and found patient was conscious but he had head injury with open right femur fracture with profuse bleeding having left tibia fibula

open fracture, multiple region abrasions, and eye bleeding with laceration and ankle injury too.

EMT immobilized the fractured part with splint and wound care was also given. EMT and Pilot took the patient on the stretcher with the help of bystanders present on scene. EMT connected oxygen and base line vital signs were recorded as follows: L.O.C Pulse Blood Pressure Respirations SPO2 % conscious 86b/mins 100/60mmhg 22b/min 94% The EMT maintained the circulation by IV canulation and then called ERCP Dr. Navjyot and he advised to start IV fluid NS and monitor

vitals for every 5mins and connect oxygen at 15litrs. According to ERCP consultation all essential medications were given to the patient.

The victim was handed over to the GMC hospital Bambolim with proper pre hospital care.

**REFLECTION BY EMT : SIDDI KERKER**

This victim was very critical but I tried doing best what I can to save his life. It tested my skill to the core. Feeling blessed for being part of GVK EMRI.

REFLECTION BY PILOT: RAMESH VARAK

I feel happy to help the victim in pain. My main job is to shift the patient safely to hospital in time.

**CASE DETAILS****PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE**

AMBULANCE LOCATION : PORVORIM P.S
CASE ID : 202000000151311
DATE : 16/05/2020
CALL TIME : 00:16 HRS
ERCP : DR. NAVJYOT
RECEIVING HOSPITAL : GMC BAMBOLIM



A CASE OF CHEST PAIN

On 11th May 2020 at 1717 hrs, Dr. Siraj called 108 Emergency Response Center requesting for inter facility transfer (IFT) from CHC Kheralu to GMERS hospital, Vadnagar to shift 76 years old male patient, Mr. Lavajibhai Chaudhary suffering from severe chest pain since last 30 minutes. He is known case of hypertension and ischemic heart disease on regular treatment.

Ambulance located at Vadnagar location manned with EMT Rina Patel and Pilot Ramesh Desai was dispatched immediately for the IFT. While enroute, EMT Rina kept all relevant equipments ready to provide all necessary pre-hospital care during transfer and at the same time, requested the medical officer to continue with care.

Ensuring scene safety and maintaining BSI precautions, EMT Rina assessed Mr. Lavajibhai. On initial assessment he was responding to verbal commands

along with agonal breathing, irregular and thready pulse, so shifted him into the ambulance on spine board immediately. In ambulance EMT Rina started ventilation with bag valve mask (BVM) immediately and assessed his vital signs. His blood pressure was 250/140 mm of Hg, Pulse rate 50 per minute and SpO2 of 50%.

Enroute to destination hospital, EMT Rina gave comfortable position and accessed IV line. As per advice of ERCP Dr. Parmar, EMT administered Inj. Lasix intravenously. While transferring the patient for about 10 minutes, Mr. Lavajibhai became unconscious without carotid pulse and breathing. EMT Rina immediately started CPR in continuation of BVM with high flow oxygen with the help of Pilot Ramesh. EMT Rina managed airway by insertion of OPA along with CPR and BVM ventilation. EMT contacted ERCP Dr. Parmar and Dr. Ramani for the online medical direction,

and accordingly, all essential emergency drugs and IV fluid RL were administered to victim. With continued CPR and BVM ventilation Mr. Lavajibhai was shifted to GMERS hospital, Vadnagar.

With meticulous observation, perseverance and continuous emergency care provided by EMT Rina with support from Pilot Ramesh, the patient's vital parameters had remarkably improved while handing over to the destination hospital.

On 48 hours follow-up, it was reported that Mr. Lavajibhai has recovered from the cardiac arrest situation which occurred in the ambulance and the overall status has improved. Thanks to the dedicated and coordinated efforts of the team '108'.



REFLECTION BY EMT : RINA PATEL

I am really happy as my case is nominated for the savior of the month of May 2020 for the first time. I am feeling proud for what I did at that time. I also want to thank Pilot Rameshbhai because without his support, I wouldn't have been able to save this patient by timely interventions.

REFLECTION BY PILOT: RAMESH DESAI

I am feeling very happy and proud to be selected as a savior. EMT Rina did great job and I followed her instruction while doing CPR. To save a life is an incredible feeling which can't be expressed through words.



CASE DETAILS

AMBULANCE LOCATION : VADNAGAR
 CASE ID : 20200500112909
 DATE : 11/05/2020
 CALL TIME : 17:17 PM
 ERCP : DR. PARMAR & DR. RAMANI
 RECEIVING HOSPITAL : GMERS HOSPITAL,
 VADNAGAR-MEHSANA

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE



MAY 2020**A CASE OF CHEST PAIN**

On 6th May '2020, 55 years old male Parshotam who was suffering from chest pain. By seeing his critical condition one of the family members called 108 for the help.

The case was assigned to EMT Archana and Pilot Dinesh of CHC Nagrota Surain Ambulance. On arrival at scene EMT found that patient was conscious, alert having chest pain from last 20 mints. Immediately EMT took the patient on spine board into the Ambulance and comfortable position, reassurance with Oxygen was given. Patient was

complaining of left side chest pain with breathing difficulty. Without wasting time Ambulance started moving towards the nearest appropriate Hospital. During enroute patient's vitals were recorded which were, Blood Pressure 157/100mm/hg, Pulse: 106/min, Respiration rate: 22/min, SPO2: 98%.

ERCP advice was taken from Dr. Prem and as per doctor's advice, EMT administered all essential emergency drugs along with semi -fowler position, Oxygen @6ltr/min. And shifted to nearest appropriate Hospital.

After the prompt Pre Hospital Care the patient's vitals showed improvement. Patient was well managed and was safely shifted to RPGMC Tanda Hospital for further management.

**REFLECTION BY EMT : ARCHANA**

I am Archana working as an EMT in GVK EMRI 108 at CHC Nagrota Surain Location in District Kangra from last 3 years. This patient was suffering from chest pain from last 20 mints. Enroute to Hospital appropriate Pre Hospital Care was provided to patient and started moving towards RPGMC Tanda. 108 Ambulance came to help him and stabilized his critical condition. The victim survived the ordeal and was praising the pre hospital care which was given to him.

REFLECTION BY PILOT : DINESH

I am Dinesh working as Pilot in GVK EMRI 108 at CHC Nagrota Surain Location in District Kangra from from last 5 Years. I would like to thank GVK EMRI for giving me an opportunity to be a part of life saving mission. EMT managed the case very well by prompt Pre Hospital Care. As a pilot I also contribute in provision of shift the patient into Ambulance & transporting up to destination with safely.

**CASE DETAILS**

AMBULANCE LOCATION : CHC NAGROTA SURAIN
CASE ID : 319183
DATE : 06/05/2020
CALL TIME : 12:47 HRS
ERCP : DR. PREM
RECEIVING HOSPITAL : RPGMC TANDA



A CASE OF ASSAULT

MAY 2020

On 20th May 2019 at around 9:44pm, Emergency Response Center (ERC) got a call from a Good Samaritan from Inamongal of Belgaum District, who was very frightened and requested for an ambulance urgently. On asking about case details our Emergency Response Officer (ERO) was shocked to know that the victim was 50 yr whose right arm was severed in an assault. Luckily the nearest available ambulance was Inamongal location which had just then completed a case and had made a release call (R Call) to ERC stating that they were ready to take next case. The case was immediately assigned to Inamongal ambulance with Pilot Mr. Nagaraj and EMT Mr. Mahantesh on duty and they reached the victim location which was 17 kms away within 18 minutes of duration.

On reaching the location and after taking history of the case, it was understood that it was a fight between two families due to personal issues which was started with an argument & led to fight meanwhile a person from opposite direction came very

close to the victim and chopped the right hand from the wrist, the victim was in severe pain, bleeding profusely and was unconscious for few minutes.

EMT Mahantesh realized the emergency condition and shifted the victim immediately into ambulance with right arm raised position, since he didn't want further loss of blood, meanwhile he had instructed Pilot Nagaraj to fetch for the amputated part which was on the road.

The wound was immediately washed and EMT applied tourniquet to prevent further blood loss. IV line was accessed and started fluid RL with 60/drops/minute. Then the amputated part was washed in normal saline and was covered with gauze cloth, with all precautionary and sterile manner it was carried in a cover along with ice packs which they had collected from a pharmacy store en route.

Base line vitals were recorded, BP-160/70mmof Hg, Pulse-126/bpm, RR-16 breaths/min, SPO2-98%, victim was

diaphoretic & agitated. On consultation with ERCP Dr.Chinmay Oxygen was started at 6 lts/min & shifted to nearest SDM Dharwad hospital emergency room for further higher management.

Hospital doctors appreciated EMT & Pilot for their presence of mind and the accurate pre hospital management which was given to the victim on scene & in the ambulance before reaching to the hospital. The victim was immediately shifted to OT and Team of Doctors conducted reconstructive surgery and the amputated part was successfully rejoined.

Patient relatives showered blessing and their gratitude towards our ambulance team. Condition of the victim was stable during 48 hour follow up call. Victim was discharged after 15 days and is currently able to move her fingers.



REFLECTION BY EMT : MAHANTESH

It was very challenging case to me and I feel very much satisfied after shifting the victim to the hospital along with limb in golden hour. It gives tremendous pleasure to serve people when they are in need of our help & support. I am thankful to GVK EMRI for giving me an opportunity to save the limb & life of a needy.

REFLECTION BY PILOT : NAGARAJ

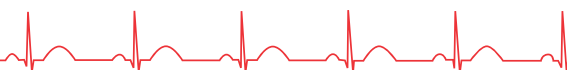
I am happy because I took part in Pre Hospital Care & I was able to shift the patient on time to hospital which made the work of doctors and other staff to treat effectively and I would like to say thanks to GVK EMRI for giving me an opportunity to work as a Pilot in 108 Ambulance to serve the community.



CASE DETAILS

AMBULANCE LOCATION : INAMONGAL
 CASE ID : 1489757
 DATE : 20/05/2020
 CALL TIME : 09:44 HRS
 ERCP : DR. CHINMAY
 RECEIVING HOSPITAL : SDM DHARWAD

PATIENT'S AMPUTATED ARM BEFORE & AFTER SURGERY



MAY 2020

A CASE OF BURNS

On 31st May 2020, Our Emergency Response Center received a call for a 28 years old male, who had attempted suicide with Kerosene. Immediately Our Emergency Response Officer assigned the case to Fire station location ambulance.

On arrival at the scene, scene was safe and BSI precautions were followed by our EMT. On initial assessment, Our EMT found that the victim was conscious and oriented. Victim had 48% of 1st degree burns over his body surface area and the victim was

covered with sterile burn sheet. Oxygen was given via simple face mask. Vital parameters were stable and IV line was secured.

En route to the hospital, EMT obtained the advice of ERCP. As per ERCP advice, IV fluids administered and the victim was continuously monitored till reached the hospital. The victim was safely shifted to Government General Hospital, Krishnagiri for the further management.

On 48 hours follow up, the victim was found to be stable.



REFLECTION BY EMT : RANJINI

It was a critical case; I provided the adequate pre hospital care to save the victim's life.

REFLECTION BY PILOT: ARULMANI

I understood the victim's condition and I assist with EMT. I moved the ambulance quickly and safely to the hospital.



CASE DETAILS

PATIENT RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : FIRE STATION
 CASE ID : 1856811
 DATE : 31/05/2020
 CALL TIME : 00:53 HRS
 ERCP : DR. KARTHIKEYAN
 RECEIVING HOSPITAL : GOVERNMENT GENERAL HOSPITAL, KRISHNAGIRI.



A CASE OF TWIN DELIVERY

MAY 2020

On 12th May 2020 at 03:00hrs, ASHA worker from Singaram village Bayyarammandal, called to our call centre about Mrs. Borra Kumari aged 25years, who went in to labor pains. Our call centre dispatched Bayyaram location Ambulance.

On reaching the scene the EMT Mr. Vemishetty Naresh, performed rapid scene size up, taken the help of Pilot Mr. Kunta Ravi and ASHA worker who was already at the scene, to control the crowd, scene safety was established. EMT assessed the victim Mrs. Borra Kumari aged 25, second gravida conscious, was in severe labor pains, already in crowning stage with little bleeding. ERCP Dr. Alam

was informed, as per his advice, taken the help of our Pilot and ASHA worker, the mother was shifted in to the ambulance, kept her in the lithotomy position, conducted the delivery with the help of attenders. First delivered male baby weighing 2.5 kgs with APGAR score 10. But placenta was not delivered. Umbilical cord was cut, baby care given kept in dry warm position, handed over the newborn to the attenders. While waiting for the delivery of the placenta, after five minutes victim had again started getting pains and the second female baby delivered weighing 2.6kgs with APGAR score 9, umbilical cord cut. After giving second baby care, dry warm position and handed over

second new born to the attenders. Placenta delivered, bleeding controlled. Both babies and mother healthy, vitals monitored.

With close monitoring, both babies and mother were shifted to PHC Bayyaram for further care and management. Our associates later learnt from the 48hours follow-up and further recent enquiry, the second born female baby developed abdominal distension, so again they called our ambulance, and then shifted her to AREA HOSPITAL, Mahabubabad. For expert care. After 24hours follow-up, the family members given us information that the baby recovered and both babies are safe and healthy.



REFLECTION BY EMT : VEMISHETTY NARESH

As compared to my previous experience, this case has given me more confidence in dealing with such emergencies. When we first went to the scene, the pregnant women and the family members were very anxious and worried. Because the medical history did not give any clue of twins, after safely handing over the mother and new borns, the hospital staff highly appreciated our good services during this lockdown period for maintain high care and hygiene. Our GVK EMRI higher officials, State Head of Operations, Regional Manager, PMs, highly praised our good efforts.

REFLECTION BY PILOT: KUNTA RAVI

Handling of this emergency has given us immense satisfaction and the family members highly appreciated our efforts and good services. The local press also highly praised our services, for all the high care and hygiene during this lockdown period.



CASE DETAILS

AMBULANCE LOCATION : BAYYARAM
 CASE ID : 4478590
 DATE : 12/05/2020
 CALL TIME : 03:00 HRS
 ERCP : DR. ALAM
 RECEIVING HOSPITAL : PHC BAYYARAM

PATIENT RECEIVING PRE HOSPITAL CARE IN 108 AMBULANCE & MEDIA COVERAGE



ERC received a call for a gunshot injury case at 19:59:00 hrs which required to be transferred to the Maharani Laxmi Bai medical college, Jhansi.

Immediately an ambulance was dispatched with EMT Mr. Vivek and Pilot Mr. Shailendra. EMT performed scene size up, took history of the event and performed trauma assessment of the patient.

In trauma assessment EMT noticed remarkable bleeding from patient's lower limb. To control the bleeding, EMT applied direct pressure to the wound using gauge pad then

after patient was shifted into the ambulance.

EMT took his vitals, the Baseline vitals were as following: Pulse 108 beats/min, Blood Pressure 110/70 mmHg, Respiratory Rate 19 breaths/min and SPO2 96%. EMT communicated with ERCP Dr. Sumit for the medical advice. As per ERCP advice EMT administered IV fluids to the patient. During transportation patient's vitals were monitored by the EMT at every 5 minutes.

After reaching to the hospital, EMT handover the patient to the hospital staff of Maharani Laxmi Bai Medical College, Jhansi.

The victim was found alive and improved after 48hrs. Follow up.



REFLECTION BY EMT : VIVEK

I feel happy that I am able to serve this type of case that is critical medically and sensitive socially.

REFLECTION BY PILOT: SHAILENDRA

After getting case we moved quickly, and reached to the scene. We worked as a team, provided care to the patient and shifted him to Medical College Jhansi.



CASE DETAILS

AMBULANCE LOCATION : CHC GOHAND HOSPITAL,
BALRAMPUR
CASE ID : 388007
DATE : 13/05/2020
CALL TIME : 19:59 HRS
ERCP : DR. SUMIT
RECEIVING HOSPITAL : MAHARANI LAXMI BAI
MEDICAL COLLEGE, JHANSI

MEDIA COVERAGE AND PATIENT PHOTOGRAPH



COVID-19 Warriors



Hon'ble Chief Minister of Tamil Nadu Shri. Edappadi K. Palaniswami launched 200 New 108 Ambulances on account of COVID19 Medical support on 27th March 2020



Women's Day Celebrations on 8th March 2020



Hon'ble Minister of Health & Family Welfare - Tamil Nadu Dr. C. Vijayabaskar Visited GVK EMRI 108 and 104 Call Centre on 20th March 2020



EMT Day Celebrations on 2nd April 2020



International Nurses Day Celebrations on 12th May 2020



Blood Donation Camp at GVK EMRI Hyderabad on 12th April 2020



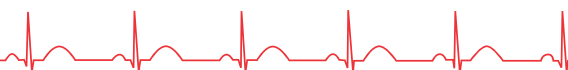
ADVISORY – AT YOUR WORKPLACE FOR COVID-19

Prelude:

When someone coughs they release droplets of infected fluid. Most of these droplets fall on nearby surfaces and objects, such as desks, tables or telephones. People could catch COVID-19 by these droplet infection and touching contaminated surfaces or objects. Hence, avoid touching eyes, nose, or mouth. If a person stands within 1 meter of an infected person, one can catch disease. Government of India has issued guidelines on workplace norms during COVID -19. It is every associates' responsibility to keep the work place clean and tidy.

Workplace guidelines during COVID19 pandemic:

- Undergo thermal scanning at the entrance of our office
- Use facial recognition for attendance
- Regular and thorough hand-washing with soap is must. Follow the instructions of correct hand wash from the display postures made available in our offices and wash rooms.
- Use alcohol based hand rub regularly while working in the office space.
- Carry your own hand rub to protect during commutation
- Avoid using public transport
- Maintain physical distancing throughout the working hours
- Use masks throughout the working hours. Use masks even while talking. Please change the mask when it gets wet. Do not touch the mask. Staff who have to move to other work tables should wear mask without fail and maintain safe distance when discussing one to one level
- Practice cough hygiene. Cough into folded arms.
- Use elbows to open the doors wherever possible
- Service staff involved are encouraged to use gloves and hand rub sanitizers
- Use internal phones wherever possible
- Your work desk and office space is getting cleaned and disinfected everyday already
- Avoid close door small group formation for informal chats. Instead stand with safe distance while speaking even preferably in open space
- Avoid unnecessary travel to outstations
- Please ensure your personal assets like mobile phones, keys etc. are sanitized
- Please report sickness to your reporting manager without fail
- Avoid stigma around COVID-19. One should attack the disease not the persons
- All team leads are encouraged to be deemed SPOC for the adherence of the COVID-19 office / work place norms by the staff reporting
- Use authentic sources to obtain updates on COVID-19 <https://www.mohfw.gov.in>
- Avoid gatherings and parties to avoid high risk exposure to oneself, family members and colleagues
- Be proud to be a COVID -19 warrior as a member of GVKEMRI.





GVK EMERGENCY MANAGEMENT AND RESEARCH INSTITUTE

Devar Yamzal, Medchal Road, Secunderabad - 500 078 Telangana, India.

Tel : + 91 40 2346 2600, 2346 2602 - Fax 2346 2178

www.emri.in

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