





DECEMBER 2017 Vol - 12 Issue 06



Partnering States and Union Territories



Government of



Government of Telangana



सत्यमेव जयते Government of Gujarat



उत्तराखण्ड शासन Government of



Government of



Government of



Governmen



Government of Arunachal Prades



Government of



सत्यमेव जयते Government of Meghalava



सत्यमेव जयते Government o West Bengal



Government of Himachal Pradesh



Government of Chhattisgarh



Government of Uttar Pradesh



Government of Raiasthan



Government of Daman and Diu



Government of Dadra and Nagar Haveli



Government of Sri Lanka

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, In Sri Lanka 6 Provinces



1,17,099 CALLS ANSWERED EVERY DAY



21,722 EMERGENCIES RESPONDED PER DAY FLEET OF
6,754 AMBULANCES BY TRAVELLING DISTANCE OF
8,89,098 KM PER DAY
5,89,51,952 EMERGENCIES RESPONSED



23,77,170 LIVES SAVED SINCE INCEPTION. **4,85,544** DELIVERIES ASSISTED BY EMTs.







Let us get prepared for behavior emergencies

On 5thDecember, 95 ambulances were inducted into 108 GVK EMRI fleet in a colour ful ceremony in the presence of Honorable Health Minister of Assam and other senior health officials. On 22nd December, Honorable Chief minister of Goa has launched eight new ambulances. It is expected that the response time may positively influences with the support of these vehicles.

December month also witnessed introduction of the number '112' in India on the pattern of some western countries, as only one number for all emergency services, as a part of Government of India's nation-wide emergency response system (NERS) project. Government can integrate all existing emergency numbers such as 100, 101, 102 and 108 into the proposed '112' helpline number, Telephone Regulation Authority of India (TRAI) said in its



recommendations on emergency number of Public Safety Answering Points (PSAP) to handle people's call in distress. Under the new system, the regulator has asked government to set up Response Management System under PSAP which will coordinate for despatch of emergency service. All the medical emergency calls will be routed to 108 and hence, ambulance services will continue uninterrupted as 112 number is scaled up different states in the near future.

In the last week of December, exclusive training of trainers was conducted at main campus on pre hospital care management of behaviour emergencies. Special curriculum and exclusive education methodology was developed to augment the existing training inputs. In view of the growing burden of mental illness, pre hospital emergency services should be appropriately geared up with focus on physical restraint, chemical restraint (drug usage) interventions and clinical manifestations of on aggressive behaviour, suicidal tendencies and substance abuse etc. National Mental Health Survey Report, Government of India (2015-16) stated that 150 million Indians suffer from mental illness but only 30 million are seeking care. Growing evidence from research has demonstrated the close association of mental disorders as precursors, risk factors, co-morbid conditions, consequences of a wide range of acute and chronic conditions like Non-Communicable Diseases, injury and violence, maternal and child health conditions. At an international level, Sustainable Development Goal (SDG) – Target 3.5, requests that countries should "Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol."

Team from the state of Gujarat has won the 108 saviour award as the best case of life saving. My appreciations and congratulations to the entire team of EMT, Pilot, ERCP, ERO and EMEs involved in this case.

With best wishes

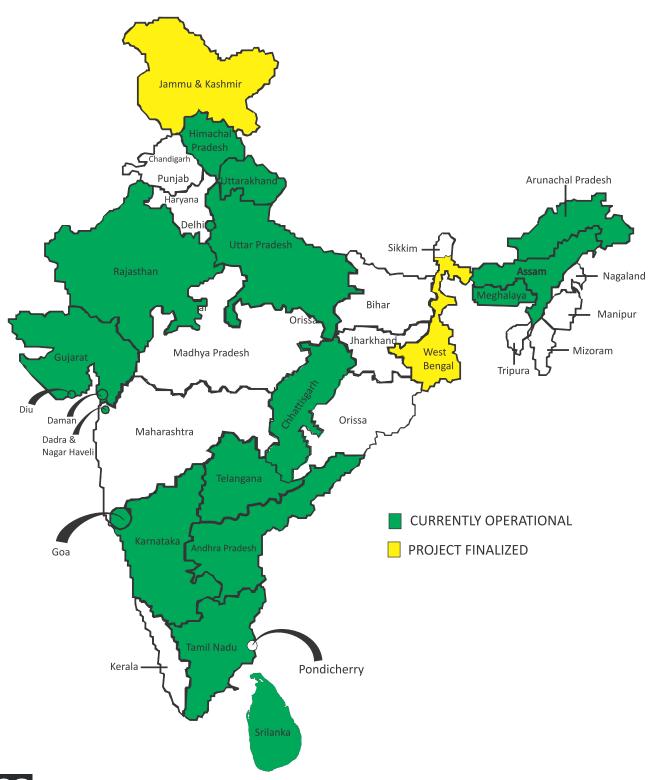
K. Krishnam Raju

DIRECTOR - GVK EMRI





Launched on 15th August 2005 in Hyderabad and expanded to 2 Countries In India 15 States and 2 Union Territories, In Sri Lanka 6 Provinces









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 withall the facilities to shift newborns to emergency care.





To reduce infant & maternal mortality rate, "Drop-back Ambulances" are being inducted into service to shift newly 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.





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 shifts patients from one Hospital to another in case of emergencies.





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.





Once a call is made to '1962' seeking medical help, an ambulance would rush to the place and take the sick animal to the nearest veterinary hospital or clinic. 1962 used as Animal in distress & Animal Amma helpline





Physical Progress

S. No	Name of the State Government	No of Ambulances	Emergencies Since Inception	Emergencies Attended in December' 17	Deliveries Assisted by EMT since Inception	Deliveries Assisted by EMT in December' 17	Lives saved since Inception	Lives saved in November' 17
1	Andhra Pradesh	468	72,66,356	20,355	70,531	91	2,72,891	5,682
2	Telangana	334	55,16,495	44,310	50,409	157	1,89,853	5,416
3	Gujarat	585	83,66,294	99,064	79,983	854	6,65,961	8,511
4	Uttarakhand	147	12,68,887	9,470	13,679	121	31,243	170
5	Goa	34	3,80,200	4,222	662	3	27,671	218
6	Tamilnadu	930	72,56,141	1,20,653	32,555	395	4,72,226	3,709
7	Karnataka	749	63,43,040	1,03,202	45,651	394	2,66,789	5,084
8	Assam	701	37,84,726	48,661	36,628	300	1,40,932	300
9	Meghalaya	48	1,62,022	1,874	1,700	19	18,884	136
10	Himachal Pradesh	198	9,77,417	13,705	8,807	117	77,357	1,700
11	Chhattisgarh	238	15,73,092	21,118	13,644	161	51,171	1,970
12	Diu Daman & Dadra Nagar Haveli	20	1,52,884	3,535	736	5	8,409	139
13	Uttar Pradesh	1,488	1,00,41,378	1,92,062	94,813	183	90,035	-
14	Rajasthan	730	21,89,746	41,941	11,187	195	-	-
15	Madhya Pradesh	-	37,82,608	-	27,505	-	98,251	-
16	Kerala	-	73,143	-	34	-	-	-
	National	6,670	5,52,78,678	7,24,172	4,60,985	2,995	23,13,422	33,035
17	Sri Lanka	88	56,579	4,986	15	-	-	-
	GVK EMRI	6,758	5,53,35,257	7,29,158	4,61,000	2,995	23,13,422	33,035

Note: Madhya Pradesh project completed on 20 th Oct, 2016 attended 37,82,608 Emergencies, assisted 27,505 Deliveries and Saved 98,251 Lives and Kerala project completed on 15 th July 2015 attended 73,143 Emergencies and assisted 34 Deliveries.

Janani Shishu Suraksha Karyakram (Mother & Child)

S. No	Name of the State Government	No of Janani Ambulances as on December' 17	Janani Beneficiaries Since Inception	Janani Beneficiaries December' 17	
1	Assam	235	12,33,745	22,988	
2	Uttarakhand	105	3,25,944	3,260	
3	Gujarat	262	17,11,236	47,693	
4	Andhra Pradesh	279	5,59,564	21,137	
5	Telangana	41	79,661	3,269	
6	Chhattisgarh	362	25,44,508	58,892	
7	Uttar Pradesh	2,270	2,31,39,032	5,63,019	
8	Himachal Pradesh	126	1,47,899	3,837	
9	Goa	4	4,891	68	
10	Rajasthan	586	8,39,300	71,025	
	Total	4,270	3,05,85,780		
Pei	Day Calculation	22,305 Dispatches/ Day			







108 Saviour of GVK EMRI - INDIA

GUJARAT TEAM	-	A CASE OF NEONATAL RESUSCITATION	08				
STATE WISE CASE OF THE MONTH							
ANDHRA PRADESH TEAM	-	A CASE OF MCI	10				
ASSAM TEAM	-	A CASE OF RTA	12				
CHHATTISGARH TEAM	-	A CASE OF NEONATAL RESUSCITATION	14				
GOA TEAM	-	A CASE OF ANIMAL ATTACK	16				
HIMACHAL PRADESH TEAM	-	A CASE OF NON-VEHICULAR TRAUMA	18				
KARNATAKA TEAM	-	A CASE OF FALL	20				
MEGHALAYA TEAM	-	A CASE OF SNAKE BITE	22				
TELANGANA TEAM	-	A CASE OF FALL	24				
TAMIL NADU TEAM	-	A CASE OF RESPIRATORY DISTRESS	26				
UTTAR PRADESH TEAM	-	A CASE OF MCI	28				
UTTARAKHAND TEAM	-	A CASE OF SEVERE INFECTION	30				
NOT FOR PROFIT ORGANISATION OPERATING IN PUBLIC PRIVATE PARTNERSHIP MODEL							





108 SAVIORS OF GUJARAT TEAM



EMT SOHIL DHADUK



PILOT JAYENDRADAS GONDALIYA

REFLECTION BY EMT: SOHIL DHADUK

I remember my days in the past when I used to regularly win EM Care Awards, I feel renewed today and promise to continue doing good in the mission of saving lives and winning more awards too.

REFLECTION BY PILOT: JAYENDRADAS GONDALIYA

I am too happy to know that I have won this award. I thank God and my EMT who have contributed equally in the life saving event.

MEDIA COVERAGE

સચિવાલયમાં હાર્ટએટેકથી કર્મચારીનાં મૃત્યુ બાદ નિર્ણય : પ્રથમતબક્કામાં 9 કાર્યાલયના 37 કર્મચારીએટ્રેનિંગ મેળવી હજારો સરકારી કર્મીઓને CPR ટ્રેનિંગ અપાશે

wharm weam

લે મહિના પહેલા ગાંધીનગર સર્વિવાલયનાં એક કાર્યલયમાં કર્મચારીનું તાત્કાલિક શારવારને લભાવે લાદેઓટલી મૃત્યુ ઘવું હતું, જેવી આ પ્રકારની ઘટના ભને ત્યારે કર્મચારીને લખ્ય પર જ તાત્કાલિક શારવાર પ્રાપ્ત થાય તે માટે દેશમાં પ્રથમવાર રાજ્ય સરકાર કારા રાજ્યની દરેક સરકારી ઓફિસનાં લાદ કર્મચારીને કર્સ્ટ કાર્ટિયાં લાઈફ સ્પોર્ટ સિક્ટમ(લીપીઆર) ટ્રેનિંગ આપવાનો નિર્ફાય લીપી છે.

સર્વિવાશયની વિવિધ વિભાગની 9 ઓક્સિનાં 37 કર્મધારીઓને જીવીકે ઇએમઆરઆઇતંત્ર દ્વારા ટ્રેનિંગ અપાઇ છે.

દરેક કાર્યાલયે ટ્રેનિંગ માટે 3 કર્મચારીના નામ આપવા પડશે

સીડીએ માંચો અને સીડીએ ખબોને પરિપત્ર હૃદા સુધના અપાઈ છે કે, દરેક કાર્યોલય દિઠ કર્સ્ટ કાર્ડીયો-પ્લમોનારી દીકક્સીડેરાનની ટ્રેનિંગ માટે 3 કર્મચારીઓના નામ, ત્યારા, ખોબદાલ નામ, ઓરિસ એટ્રા અને ઇ-મેલ આઇડી સમિતની માહિતી પોકલવા જણાવ્યું છે.

24: વિભાગના કર્મીઓ ટ્રેનિંગ લીધી વાંક સેક્રેટરી ઓક્સ, કમિન્ગર મીંડ દે માત્ર, કેમિલા કહેર લાન્ય, એસપીએમયુ- નેશનલ હેલ્થ મિશન, ગાંધનાર ખુ. કોર્પોરેશન, એડિશનલ ડાપ્પેક્ટર, મેડિકલ સર્વિસ, એડિશનલ ડાપ્પેક્ટર, પબ્લિક હેલ્લ, કોર્ટ સ્વેનશીડ કેલ એમએસ) અને બીઇએમ સાયન્સ ગુજરાત કોરેન્સિક સાયન્સ યુનિયર્સિટીનાં 37

થિયરી-પ્રેક્ટિકલ ટેનિંગ

ન જીકના વિસ્તારોની સરકારી ઓહિસોનો કર્મચારી સમિકારીઓને 108માં કઠવાડા ખાતેના કાર્યોજન્માં, દુરના કર્મચારીઓને કહેક્ટરના પરામાંથા કર્મચારીઓને કહેક્ટરના પરામાંથા કર્મચારી . દિલસભા ફેનિંગ સપાશે. 1 દિલસભા કિલ્લે ફરિય માનવ શરીર પર પ્રેક્ટીકલ હાન સપાશે. 188 ક્રોલ્ય કર્મચાર સ્થાન્ય શરીર પર પ્રેક્ટીકલ હાન સપાશે. 188 ક્રોલ્યના પ્રાપ્ય પ્રતિ, ક્રોલેલા કર્યાં કહેમ્યલામાં





GUJARAT STATE TEAM - JUNAGADH DISTRICT

EMT SOHIL DHADUK

PILOT JAYENDRADAS GONDALIYA

A CASE OF SUICIDE

Mansukhbhai Vaghera a 29 year old male was totally frustrated in life & decided to end it by committing suicide. On 10th of December he was feeling depressed as things in his life were not happening according to his will. He consumed an overdose of some medication and started to feel giddy, as the family members tried to save him he locked himself up in his room and tried to hang himself from the ceiling fan. The neighbors rushed to help and broke open the door as he crashed unconscious to the floor. The parents quickly called 108 & requested for an ambulance.

The ambulance located at City 1 location in Junagadh district was dispatched for the case. EMT Sohil Dhaduk and Pilot Jayendradas Gondaliya were on duty. After collecting the essential case details, they rushed to the incident location. While on the way, EMT instructed the caller to not to panic and to save time by confirming the correct address. After preparation of necessary equipments, BSI precautions were taken.

On arrival at scene the neighbors had already carried him some distance towards the ambulance. So with a quick initial assessment EMT Sohil with Pilot Jayendradas promptly loaded him into the ambulance.

En-route to the hospital our EMT continued a detailed assessment and initiated an airway management by inserting an OPA and oxygenating him via BVM. Also intermittently suctioning was done and constantly SPO2 along with the other vitals were monitored. Still en route his condition improved as he started gagging and coughing. OPA was then removed and NPA was inserted and after a complete assessment of the vital health parameters, Emergency Physician Dr. Mehul Kothari first & later Dr. Ajay Dave were consulted over the phone for online medical direction. As per the advice, EMT Sohil administered all the necessary life-saving care.

With diligent observation and continuous monitoring, Mr. Mansukhbhai was shifted to Civil Hospital at Junagadh. At the time of handing over, the vital parameters had remarkably improved.

To a 48 hour follow-up call, it was reported that the victim Mansukhbhai is now under intensive care and supervision of the hospital staff. Thanks to the dedicated and coordinated efforts of the '108' team that saved his precious life.



Patients receiving Pre-hospital care by '108' ambulance.

CASE DETAILS

AMBULANCE LOCATION: JUNAGADH City 1.

CASE ID: 20170004105985

DATE: 10/12/2017

CALL TIME: 20:21 HRS

ERCP: DR. MEHUL KOTHARI &

DR. AJAY DAVE

RECEIVING HOSPITAL: CIVIL HOSPITAL JUNAGADH





108 SAVIORS OF ASSAM TEAM

ADHIR CHANDRA ROY

REFLECTION BY EMT: ADHIR CHANDRA ROY

The case that I handled gave me an immense joy and happiness as I could able to save their lives who were critically injured and were in need of proper care and help. My colleague Pinku Dutta was very very helpful during the course of handling the case .Thank you all who are associated with EM services in Assam



PILOT PINCKU DUTTA

REFLECTION BY PILOT: PINCKU DUTTA

I take the opportunity to thank everyone especially GVK EMRI for providing us with such huge platform to serve our own native who are fighting against ill health and their lives.

MEDIA COVERAGE

নাগৰিক আৰু জি চি কেই এম আৰু আই ১০৮ সুত্ৰপ্ৰ। বেই আজি এনে সংগোচেম নাগেনে কৰি মংখ্যটিও মৰ বহিমান কৰা অধিকং পৰিজ্ঞানৰ কথা উল্লেখ লোকিসংগৈ ২২ জিয়াৰৰ কথা ১ জানুৱাৰীক নাকৰি নাত বুকুজা প্ৰেট গ্ৰহণ কৰা কৰিব কৰা প্ৰেল্ড কৰা পোৱা বা হয়। ১০০ অবলীকৰ্মীন চেৰত উপাধাত সঞ্চা , নামনি অনাৰম মাণ্ডেমিক ক্ষুবাক আঁশিক শাইনীয়ে, ১৮ এখনৰ নামেনিক ক্ষুবাক ক্ষাত্ৰেক ক্ষুবাক ১৮ এখনৰ নামেনিক ক্ষুবাক ক্ষাত্ৰেক ক্ষাত্ৰিক আঁশিক ১৮ এখনৰ নামেনিক ক্ষুবাক ক্ষাত্ৰেক ক্ষাত্ৰিক আঁশিক সংখ্যক কৰি কয় যে ৩০ ডিডেম্কা পৰা ২ কুটোলৈ স্কুপ্তাৰ সেটোই বাজাৰ বাজ্ঞাকানুহৰ একাক চানহৰ প্ৰতিবা বিশেষকৈ বাজাৰ বিভিন্ন স্থান চিন্তি ক্ষেত্ৰিক অৰ্থনিকৰ প্ৰক্ৰোকান্তৰ কৰি দিশকে আগৰীবাকৈ দৰক হৈ থাকিব। খেলছাৰ মৃত পৰ, ভিনিত্ৰীবাৰ কালেল তিনিআমি,

প্রতিন্দিন সংগাদ, গুরাহানি, ২৯ ডিচেম্বর ১ বজনোনিত। স্থানিতপুনর ঠেলামন, গুরাহানিব সংগাদি (১৯ নার্চ নিক্রি নিক্র নিক্রি নিক্র নিক্রি নিক্র নিক্রি নিক কোবা হয় সে ১০৮ মৃত্যুগ্রম সেনাই অভিয়ালৈকে বাঞ্চা ১.৪ গ্রাহ লোকৰ জ্লান্ত কলা কৰিছে। কিন্তু ভূৱা কো কাল কৰে এই সেনেই বছ সমাত অসুবিধাৰ সন্মুখী হয়। কৰুণ প্ৰতিনিচন ১০৮ আৰু ১০২ সেৱটো বহ ব্যা কৰা বাজেকো ১০০ চনক ১০২ চৰকো পছে।
চুক্ৰেকাট্টা চনক কৰা সাহে পিছ ইয়াৰ দাহ ১৫-১৯
*এখাহে কেন্দ্ৰী সেৱা নিয়বি প্ৰতা কৰা অপাশতিক কোন কৰা সংস্থা কী কৰা বাসে কৰাৰী সমত্ৰ সৃষ্টি ছত কোন কৰা সংস্থা কী কৰা বাসে কৰাৰী সমত্ৰ সৃষ্টি ছত কোনকৰিল। ইকানো কথিল ১০৮ মুক্তম্বাৰ কৰা ২০২ আনক্ষী সমাত মুঠ ৭০১ ক বাই অস্ক্ৰিক হৈ ক্ষম কথা সিয়া বি ভি কেই এমু স্কৰ স্কাই প্ৰতিষ্ঠাত এই নেত্ৰত কৰ্মণত হৈ আছে প্ৰৱ ডিনী হেডাৰ বিষয়া-আন্তৰ্শ চৰিটো জনলীকালীয় কেনা কৰা আৰু কৰাৰ পিছৰ আনক্ষাৰত ২০ নিনিট আৰু চহলামালত ২০ নিনিটত ৰ্ভু মন সেশাৰ বাচন পটনাস্থলীক উপস্থিত জেলা কৰা কৈছে বুলি বিলাকেইডলে সংগদক্ষেত্ৰত নৰ্ভ





ASSAM STATE TEAM - KARBI ANGLONG DISTRICT

EMT ADHIR CHANDRA ROY

PILOT PINCKU DUTTA

A CASE OF RTA

Mr. Sarman Tokpi (Male 27 years) and Mr. Bimal Taye (Male 32 years) both the friends are the permanent residents of village Hari basti in the district of Karbi Anglong. On 21st December 2017, they had a picnic party in the day with some other friends. After the party they were returning back to their village through the Diphu Highway. They were drunk. The dusk was just covering the area. They were in full joyous mood riding crisscross on the road and about to reach Dengaon area. During that time a maruti swift Dzire hit them from behind and escape from the scene. The rider Mr. Taye could not control the bike and hit an electric post on the road side with full motion and force. Both were scattered away from the bike. An eye witness immediately called 108 for help.

Emergency Response Officer assigned the case to Dokmoka Location of Karbi Anglong District at 14:45 PM.EMT Adhir Chandra Roy and Pilot Pinku Dutta immediately rushed to the scene being fully prepared to handle the RTA. When they reached scene, they found both the victim lying in semi conscious state with groaning sound .Doing Triage EMT found that the rider Mr. Taye was more critically injured on his head and he was almost unconscious. Immediately EMT stopped the bleeding from laceration on the forehead of Mr. Taye and shifted to ambulance and administered oxygen. Other victim Mr. Tokpi was also critically injured on his left leg. His Tibia –fibula was broken, so firstly, with help of Pilot EMT splinted the left leg. With the help of bystanders both the victims were shifted to the ambulance. Then, EMT checked the vitals, vitals of victim -1 Bimal Taye - Pulse 70, BP 130/90 mm of Hg, Loc-Unconscious, RR (bpm)15, victim-2 Sarman Tokpi - Pulse 72, BP 110/70 mmofHg, Semi-Conscious RR (bpm)12.

On detailed assessment, EMT came to know about multiple injuries on the body of Mr. Tokpi with painful tenderness. Abrasions and swellings were also observed on the body of the both victims. Showing the experienced hand, EMT was well equipped to give extra care to the victims. Abrasions were cleaned with iodine swaps and dressed where ever required. The fracture bone was properly splinted and immobilized during the transport. As well as the vitals were closely monitored enroute to the hospital.

Both the victims were handed over to Dokmoka PHC in safe condition for the better and higher treatment and care.



Patients receiving pre hospital care in 108 ambulance

CASE DETAILS

AMBULANCE LOCATION: DOKMOKA LOCATION

CASE ID: 479803

DATE: 21.12.2017

CALL TIME: 16:45 HRS

ERCP: Dr. SANTANU TAMULI

RECEIVING HOSPITAL:

DOKMOKA PHC





108 SAVIORS OF CHHATTISGARH TEAM



EMT NARENDRA VERMA

REFLECTION BY EMT: NARENDRA VERMA

I like to handle challenging cases, and I always keep my self ready for such critical case.

REFLECTION BY PILOT: CHUMMAN

I am thankful to GVK EMRI for giving me this chance to do such a great work.



PILOT CHUMMAN

MEDIA COVERAGE







CHHATTISGARH STATE TEAM - BEMETARA DISTRICT

EMT NARENDRA VERMA

PILOT CHUMMAN

A CASE OF SUICIDE

When 39 Years old Shankar cut his neck from sharp object. This incident happened in Temri village at 3 PM, mentally demotivated & sad Shankar attempted suicide. By seeing his blood and the injuries, family members called 108 for the emergency medical help and Immediately rescue team member EMT Narendra Verma & Pilot Chumman left for incidence place from their Nandghat base location. In between the journey from Nandghat to Temri, EMT Narendra called the family members to suggest first aid treatment, so that situation can be kept under control.

Within few minutes the safety team reached to the address with ambulance. Team members EMT and Pilot examined the victim and took him inside the ambulance. EMT has done dressing to stop the blood flow and gave him oxygen. He examined the vitals and found that pulse was 90/min, BP was 90/60mm of Hg, Spo2 was 86% and respiration was 16/min. With this information he called ERCP Dr. Manish for advance medical help.

According to his directions EMT gave injection Tramadol, Hydrocortisone and IV RL fluid. By giving IV fluid, EMT did not let victim get into Hemorrhagic shock and victim was admitted to 10 Km away in Mahadev Hospital.



patient receiving pre hospital care in 108 ambulance

CASE DETAILS

AMBULANCE LOCATION:

CHC NANDGHAT

CASE ID: 2143744

DATE: 17.12.2017

CALL TIME: 15:18 HRS

ERCP: Dr. MANISH

RECEIVING HOSPITAL: MAHADEV HOSPITAL.

REFLECTION BY DR. SINGH

The credit of saving life of patient goes to EMT and Pilot. EMT has given good pre hospital care to the patient and safely admitted him to the hospital.





108 SAVIORS OF GOA TEAM



EMT SIDDHI SIDDHESH KERKAR



PILOT
VITHOBA MALU SHETYE

REFLECTION BY EMT: SIDDHI SIDDHESH KERKAR

It is the first time for me to handle this type of trauma emergency. Even though I have handled many trauma cases, at first I was nervous to attend this case but thanks to the training I received, It gave me confidence and knowledge on how to handle Multiple injuries.

REFLECTION BY PILOT: VITHOBA MALU SHETYE

My part in this case was minor, but it is very effective .It feels proud and happy to help the people.

MEDIA COVERAGE







GOA STATE TEAM - NORTH GOA DISTRICT

EMT SIDDHI SIDDHESH KERKAR

PILOT VITHOBA MALU SHETYE

A CASE OF RTA

On 14 Dec 2017 at 08:49 am Porvorim ambulance received a call from ERC stating that there was road traffic accident. The case involved Shantaram Naik, a 22 year male from Porvorim, met with a major accident while riding.

EMT Siddhi and Pilot Vithoba went for the scene with relevant equipment to provide necessary pre hospital care. En route to the scene EMT had given pre arrival instructions to the caller not to move the victim, not to feed him anything orally and if any major bleeding is visible, control it with direct pressure.

Ensuring scene safety and maintaining BSI precautions, the team rushed towards the accident location. Victim Shantaram found alert and lying on the ground, EMT began a quick trauma survey and found open femur fracture on left leg, crush injury on both the hands, Teeth were broken and bleeding, head injury with multiple abrasions. Victim was conscious but disoriented.

Bleeding was control by direct pressure. EMT shifted the victim in ambulance with help of Pilot. Immediately connected to the oxygen, splinting, immobilization and wound care was taken and recorded baseline vital signs as follows

Patient was conscious, Pulse-58beats/min, BP-90/60 mm of Hg, Respiration - 20 breaths/min and SPO2-82%.

Then the EMT took ERCP conference from Dr. Shyann and explained the patient condition and vital signs. The ERCP advised EMT to start IV fluid RL and monitored vitals continuously as the condition was critical. EMT followed the advice given by ERCP.

EMT gave reassurance to the patient and relative. EMT handed over patient at the GMC Bambolim. A follow up call, post 48hrs confirmed victim was out of danger and on the path recovery. The relative are grateful towards the service for the needy showered their well wishes and blessings to the entire 108 team.



Patient receiving pre hospital care in 108 ambulance

CASE DETAILS

AMBULANCE LOCATION: BICHOLIM

CASE ID:2017000000234458

DATE: 14/12/2017

CALL TIME: 08:49 HRS

ERCP: DR.SHYANN

RECEIVING HOSPITAL:

GMC BAMBOLIM





108 SAVIORS OF HIMACHAL PRADESH TEAM



EMT PANKAJ KALSI



I am Pankaj Kalsi working as an EMT in GVK EMRI 108 NAS at CH Dadahu Location in District Sirmour Himachal Pradesh since last 6 Years.

This pregnant women had not undergone routine checkup like ante-natal checkup, blood test, Ultrasonography, even she don't know about her LMP and EDD. As per ERCP Advice delivery conducted inside ambulance and saved two lives. The victim survived the ordeal and was praising the pre hospital care which was provided to her by us.



PILOT NARESH KUMAR

REFLECTION BY PILOT: NARESH KUMAR

I am Naresh Kumar working as Pilot in GVK EMRI 108 at CH Dadahu Location in District Sirmour Himachal Pradesh since last 6 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 shifting the patient into ambulance & transporting her in a safe manner.

MEDIA COVERAGE AND APPRECIATION LETTER





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HIMACHAL PRADESH STATE TEAM - SIRMOUR DISTRICT

EMT PANKAJ KALSI

PILOT NARESH KUMAR

A CASE OF DELIVERY

On 11th Dec 2017, 27 years old female Kulja Devi was suffering from Labor pain. Immediately her family member called 108 for help.

The case was assigned to EMT Pankaj Kalsi and Pilot Naresh Kumar of CH Dadahu Ambulance. On reaching the scene, EMT found the patient was conscious and having labor pains since last 480 mins, with suspected full term and 4th gravida and having no ANC Record. The case was unbooked there was no ANC Record with the patient. Immediately the patient was shifted inside the ambulance. Upon assessment EMT found that fluid discharge and regular contractions after 2-3 mins. Within no time crowning started. EMT did suctioning the baby and gave reassurance to mother and told her to push during contraction. A male baby was delivered inside the ambulance with the standard child birth approach of EMT.

Immediately EMT did suctioning, cleaning and drying, clamping cord and kept the baby warm.

Immediately the team started moving towards CH Dadahu. EMT on observation and recorded mother's vitals which were, Blood Pressure 140/94 mm of Hg, Pulse: 90/min, Respiration rate: 18/min, SPO2: 90% and Baby APGAR score was 10/10.

ERCP advice was taken from Dr. Khatri and as per doctor's advice EMT administered patient with, oxygen @ 8ltr/mins, foot elevated and given left lateral position. After the prompt pre hospital care dedicated & skilled staff of 108 the patient's vitals showed improvement. Patient was well managed and was safely shifted to CH Dadahu for further management.



CASE DETAILS

AMBULANCE LOCATION:

CH DADAHU

CASE ID: 851642

DATE: 11/12/2017

CALL TIME: 5:27 HRS

ERCP: Dr. KHATRI

RECEIVING HOSPITAL:

CH DADAHU





108 SAVIORS OF KARNATAKA STATE TEAM



EMT DEVARAJA M

REFLECTION BY EMT: DEVARAJA M

The case was a critical one .Victim had major injury with amputated legs. On scene started O2 first aid and wound care given. I felt very satisfied. I got good support from Pilot and I am proud to be associated with GVK EMRI.



PILOT MANJUNATHA KADIVALAR

REFLECTION BY PILOT: MANJUNATHA KADIVALAR

I felt very happy because I also took part in prehospital care. I would like to say thanks to GVK EMRI for giving an opportunity to work as a pilot in ambulance and to serve the community.

MEDIA COVERAGE







KARNATAKA STATE TEAM - UATTAR KANNADA DISTRICT

EMT DEVARAJA M

PILOT MANJUNATHA KADIVALAR

A CASE OF TRAIN ACCIDENT

On 1st December 2017, at around 08.13.AM, a 50 year lady met with a train accident.

Our ambulance reached the scene on time. The EMT collected the history and started the assessment.

On scene she had major injury, her legs were amputated. She was conscious and she was immediately shifted to ambulance. The limbs couldn't be salvaged as it was crushed.

The patient vitals were as follows: Altered sensorium. Pulse rate 100bpm, Respiratory rate 20bpm, BP 100/60mm of Hg, SPO2 90%. Pupils were normal.

Management:

- 1. Wound care & bleeding control.
- 2. IV fluids & O2 were administered.

There was no appreciable change in the vitals at the time of admission to Victoria hospital (8 km). The Doctors & the nursing staff appreciated our efforts in giving proper pre hospital care to the patient.



Patients receiving Pre-hospital care by '108' ambulance.

CASE DETAILS

AMBULANCE LOCATION: MEJESTIC RAILWAT STATION

CASE ID: 5071879

DATE: 01/12/2017

CALL TIME: 08:13 HRS

RECEIVING HOSPITAL: VICTORIA HOSPITAL





108 SAVIORS OF MEGHALAYA STATE TEAM



EMT EVANSTAR NONGSPUNG

REFLECTION BY EMT: EVANSTAR NONGSPUNG

Trauma emergencies are always scary but the knowledge that I received from my instructors during the refresher training has boosted my confidence, knowledge and skills. I am very happy that the patient is alive and to know that he is now in a stable condition.

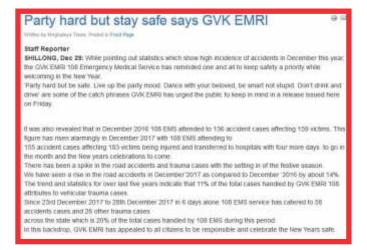


PILOT PHINDON KHARMALKI

REFLECTION BY PILOT: PHINDON KHARMALKI

In case of Road traffic accident and also any emergency critical cases it is my responsibility to reach to the scene safely and quickly as possible and also to transport the patient to the hospital safely. I am very happy that I have save the life of this patient.

MEDIA COVERAGE







MEGHALAYA STATE TEAM - MAIRANG BASE, WEST KHASI HILLS DISTRICT

EMT EVANSTAR NONGSPUNG

PILOT PHINDON KHARMALKI



Patient received pre hospital care in 108 ambulance

CASE DETAILS

AMBULANCE LOCATION: MAWRYNKNENG BASE

CASE ID: 20170000149034

DATE: 09/12/2017

CALL TIME: 17:45 HRS

ERCP: Dr. NONGTDU

RECEIVING HOSPITAL: CIVIL HOSPITAL, SHILLONG

A CASE OF RTA

Living stone Mukhim is a 42 years male living with his family in Puriang Village in East Khasi Hills District of Meghalaya. Livingstone supported himself and his family for their daily living by working as a farmer in his own farm in Sung Valley.

On the 9th December 2017 at around 17:30, Livingstone went out for harvesting of crops in his farm. In the evening, when he was on his way back home after harvesting, on crossing the main road, suddenly a car came and ran over him and left him bleeding and injured in the middle of the road. The eyewitness who witnessed the incident immediately rushed toward the incident scene to help him and at the same time they call 108 for help.

The ERO on duty immediately assigned the case to Mawryngkneng base which is based just 6 Kms away from the incident location. EMT Evanstar and Pilot Phindon, after getting information from the ERO without any delay went to the scene to attend the case. On reaching the scene the EMT found out that Livingstone is having a severe injury on his lower limb and he was still conscious. The EMT and Pilot then quickly shifted the patient inside the ambulance. Inside the ambulance the EMT assessed the patient and found out that the patient was having a crushed injury on his right lower limb with profuse bleeding and also complaining of terrible pain of his whole body. The EMT also found out that the patient was having multiple laceration and abrasion on his head and forehead and also on his right hand. The EMT then did wound care to the patient to stop the bleeding and on ERCP advised the EMT gave analgesic injection to the patient to relieve the pain. The EMT reassessed the patient enroute and monitors his vitals and the patient was then safely admitted in Shillong Civil Hospital.





08 SAVIORS OF TELANGANA STATE TEAM



RAVINDAR K



"It was a challenging task at the scene that baby's head was completely obstructed and fully cyanotic (blue in color). The other side, the family members were requesting to save only the mother. The advice of ERCP and following protocols helped us a lot in handling of this case. It's a great feeling that we could give timely NNR, good pre hospital care, which saved the precious life of the new born. Our Associates later after getting the feedback, knowing about the well being of the baby from the family members, personally went to their village, taken the photographs of baby and they were also praising us a lot for our timely help and services."

REFLECTION BY PILOT: SHAMSHUDDIN MD



PILOT SHAMSHUDDIN MD

"When we reached the scene, we worried a little bit, about the abnormal presentation of the new born and family members were requesting us for save the mother by immediate transfer. With all our confidence, we provided all our sincere, timely efforts, provided care of the new born and the mother."

MEDIA COVERAGE AND VICTIMS PHOTOGRAPH













TELANGANA STATE TEAM - RANGAREDDY DISTRICT

EMT RAVINDAR K

PILOT SHAMSHUDDIN MD

A CASE OF NEONATAL RESUSCITATION

On 1st December 2017, at 08:21, a call was received to attend an pregnant woman in Boyapalli Tanda, Kodangal Mandal of Vikarabad district. Mrs. Gori Bai aged 25, 2nd gravida, full term, suffering with labor pains and her worried family members had informed the same to our 108 services, as they have already started conducting the delivery through their traditional procedure (Rolling the pregnant women on her hands and knees) and the ERC dispatched our 108 Kodangal Ambulance team to care the pregnant woman.

On reaching the Scene, EMT Mr. Ravindar assessed the pregnant woman found that Mrs. Gori Bai, has already delivered the feet and body, up to the neck (head was not delivered). Because the family members were not prepared to handle such a case in that situation. Requested our service to save the mother. Immediately EMT with help of Pilot Mr. Shamshuddin, preparations were made to complete the delivery at scene, the same information was shared to ERCP Dr. Rajesh and taken advice. On his advice following BLSO training, breech delivery techniques were used in delivering of the female Baby, on our assessment the Baby was not crying, the APGAR score was very poor and the baby's color was blue. EMT with help of Pilot started Neonatal Resuscitation (NNR), after few minutes baby's color improved to pink and after few more minutes' baby started to cry, APGAR score improved to 9. Continuing the care of the new born, third stage of delivery completed successfully. Then after seeing the good improvement of the new born, both mother and new born shifted into the ambulance by using Auto Loader. Keeping the mother in comfortable position, initiated high flow oxygen to new born, given reassurance to mother and family members. Base line vitals were recorded and found the BP 110/70mm Hg, Pulse Rate 98/min, Respiratory rate 22 breaths/min. ERCP was informed of the improved condition of the new born and as per his advice, initiated IV fluids to the mother.

Both the mother and the newborn were shifted to The District General Hospital, Vikarabad. The Hospital personal appreciated our good efforts. Examined both mother and new born, in the process of observation of the new born by the specialist, they admitted both of them for one week at Hospital. Later follow up by our ambulance team, were informed that they had given good care for both new born and mother. Later they were discharged from the hospital, after complete recovery and went home.

The complete process of Pre Hospital care procedure at the scene and good timely NNR efforts of our Kodangal Ambulance team (EMT and Pilot) were covered in News media of Telangana and other News channels of TV- as Breaking News and Published in all News papers.



baby received pre hospital care in 108 ambulance

CASE DETAILS

AMBULANCE LOCATION: POLICE STATION, KODANGAL

CASE ID: 50686515

DATE: 01/12/2017

CALL TIME: 08:21 HRS

ERCP: Dr. RAJESH

RECEIVING HOSPITAL:

DISTRICT GENERAL HOSPITAL,

VIKARABAD





108 SAVIORS OF TAMIL NADU STATE TEAM



EMT VIDHYA



PILOT VELLAYADHEVAN

REFLECTION BY EMT: VIDHYA

I had provided the pre-hospital care as per the advice given by the ERCP. I am glad that, every day is a new learning.

REFLECTION BY PILOT: VELLAYADHEVAN

On assigning the case from ERC, we immediately shifted the ambulance and reached the scene within few minutes.

MEDIA COVERAGE







TAMIL NADU STATE TEAM - KANCHEEPURAM DISTRICT

EMT VIDHYA

PILOT VELLAYADHEVAN

A CASE OF SUICIDE



VICTIM PHOTOGRAPH

On 4th December 2017, Chrompet location 108 ambulance received a call for 20 yrs old boy who had self inflicted injury because of blue whale game .Our ambulance crew reached the scene within 10 minutes and assessed the victim. The victim was in unconscious state with severe bleeding in his left hand. Wound care was given and victim was immediately shifted into the ambulance. Vitals were assessed. EMT obtained the ERCP advice and administered the IV fluids as advised. The victim condition was stabilized and transferred to RGGH.

CASE DETAILS

AMBULANCE LOCATION:

CHROMPET

CASE ID: 5886768

DATE: 04/12/2017

CALL TIME: 5:03 HRS

ERCP: Dr. REEGAN

RECEIVING HOSPITAL:

RAJIVE GANDHI GH, CHENNAI.





108 SAVIORS OF UTTAR PRADESH STATE TEAM



EMT SHIV BAHADUR



PILOT RAM SAHAY

REFLECTION BY EMT: SHIV BAHADUR

We got a call for accidental case at 08:15. There was a road traffic accident occurred due to heavy fogging and low visibility. A school bus was involved in the accident. We moved quickly and reached to scene. I prioritized patients as per triage protocol then provided medical care. It was challenging to manage many patients with limited resources; we followed the protocol and provided best possible care to our patients.

REFLECTION BY PILOT: RAM SAHAY

After getting case ID we moved quickly, and reached to the scene. We worked as a team and provided care to all patients and shifted them to CHC Saidpur.

MEDIA COVERAGE

घटना में घायल महिला यात्री का इलाज करता सीएचसी कर्मी

नंदगंज के सरवरनगर स्थित होलीकॉस इंग्लिश स्कूल की स्कूली बस गुरूपार की सुबह करीब 30 बच्चों को लेकर स्कूल जा रही थी। इस बीच अभी वो धानाक्षेत्र के खांवपुर देवकली पुल के बीच में पशुंची ही भी और एक ट्रैस्क्टर को ओवरेटक करने का प्रयास कर रही भी तभी गाजीपुर की तरफ से आ रही पात्री बस कोहरे के कारण दिखी नहीं और दोनों बसे आपस में टकरा गई। घटना में स्कूली बस में सवार कक्षा तीन का छात्र हर्ष यादव 10 पुत्र अशोक यादव निवासी चितीश, तीन का ही श्रेपांश यादव 10 पुत्र धर्मराज यादव निवासी मलहटीला व निंदीपुर निवासी कका 9 का छात्र विशाल वादव 15 पुत्र महेंद्र यादव के साथ ही उसमें सवार शिक्षक हरिलाल कुशवाहा 65 निवासी पिचरी धायल हो गए। वहीं धाजी बस में सवार कई पात्री पायल हो गए। उसमें से दी पायल यात्री दीनानाथ पादव 40 निवासी रेवतीपुर व मुहम्मदाबाद के हरिवल्लभपुर निवाशी शिवकुमारी तिवारी 30 पत्नी रविंद्र तिवारी को सामुदायिक स्वास्थ्य केंद्र लाया गया। शेष यात्री इलाज के लिए अन्यत्र चले गए। सूचना पर मौके पर पहुंचे कोतवाल शरदचंद्र त्रिपाठी ने सिपाही जयचंद कन्नीजिया द्वारा सभी धायलों को 108 एंबुलेंस से सामुदायिक स्वास्थ्य केंद्र भेजा। गौरतलब है कि अभी बुचवार से ही कोहरा पड़ना शुरू हुआ है। इन दो दिनों में ही ए हो बारक हर्पाटकार को गई हैं। जिसमें हो गानी बसों :





UTTAR PRADESH STATE TEAM - GHAZIPUR DISTRICT

• EMT SHIV BAHADUR

PILOT RAM SAHAY

A CASE OF RTA

A School bus of Holy cross English school carrying 30 students, met with an accident due to low visibility while over taking a tractor.

ERC received a call from schoolteacher who was travelling along with the students. Ambulance was dispatched immediately along with the crew. EMT Shiv bahadur along with Pilot RamSahay reached to the scene. EMT started primary triage and found one patient of Red category (unconscious) and 2 other patients of Green category (minor injuries).

EMT took care of airway and breathing and started oxygen and performed trauma assessment. After performing trauma assessment and bleeding control, patient was shifted into ambulance with all spinal precaution.

Vitals were monitored by EMT; his initial vitals were Pulse 108 beats/min, Blood Pressure 120/80 mmHg, Respiratory Rate 20 breaths/min. Others patients were attended with help of pilot and wound care had provided to them.

All patients were shifted to CHC Saidpur.

After 48 hours of follow-up patient was alive and improved.

CASE DETAILS

AMBULANCE LOCATION:

PHC DEVKALI

CASE ID: 11877050

DATE: 21/12/2017

CALL TIME: 08:15 HRS

ERCP: Dr.

RECEIVING HOSPITAL:

CHC SAIDPUR





108 SAVIORS OF UTTARAKHAND STATE TEAM

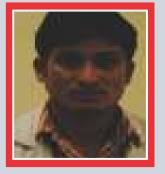


EMT SUSHILA GARKOTI

REFLECTION BY EMT: SUSHILA GARKOTI

"I am working as an EMT in GVK EMRI 108 at Champawat Location. I am working in GVK EMRI as an EMT since 2 years. GVK EMRI 108 has given me a great opportunity to serve people. During this case, I experienced various challenges. Patient was in labor pain with crowning stage, the baby delivered in ambulance and with the help of the pre hospital care, we could manage the case."

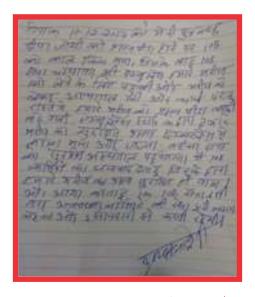
REFLECTION BY PILOT: UMED SINGH



PILOT UMED SINGH

I felt very happy because, we could treat and shift the precious life of the patient and while helping the EMT, I felt happy that I am also working to sace lives. I am proud to be working in GVK EMRI .

APPRECIATION LETTER







UTTARAKHAND STATE TEAM - US NAGAR DISTRICT

EMT SUSHILA GARKOTI

PILOT UMED SINGH

A CASE OF DELIVERY



New born baby receiving pre hospital care in 108 ambulance

On 10th December'17, 23 years old female Mrs. Deepa Joshi was suffering from Labor pains from past 4 hours. Her family members called 108 for help. Immediately ambulance assistance was given to the patient. EMT found Mrs. Deepa Joshi was conscious and was suffering from labor pains, she was in second gravid and full term pregnancy. She was restless and was sweating profusely. Patient was having contractions every 2-3 mins. Patient was immediately shifted inside the ambulance and moved towards the nearest hospital. But after frequent reassessment EMT saw the crowning of head. She gave reassurance to mother and told her to push and with a moment a female baby delivered in ambulance with the assistance of EMT. Immediately EMT done suctioning, cleaning and wrapped baby to keep the baby warm. EMT covered the baby with towel, and cut the umbilical cord. By listening, the crying baby mother expressed thanks to the EMT hard work.

Immediately the team started moving for the District Hospital, Champawat. EMT on observation and recorded mother and newborn baby vitals were, BP 130/80 mm of Hg, HR 90/min, Respiration rate 22/min, Spo2 98% and Baby APGAR 10/10.

EMT was regularly doing vital check up. After the prompt pre hospital care and great efforts by EMT, case was well managed and shifted to District Hospital for further treatment.

CASE DETAILS

AMBULANCE LOCATION:

CHAMPAWAT

CASE ID: 1326295

DATE: 10/12/2017

CALL TIME: 08:56 HRS

ERCP:

RECEIVING HOSPITAL:
DISST HOSPITAL CHAMPAWAT





Shri. Manohar Parrikar Hon'ble Chief Minister of Goa Launched 08 new 108 Ambulances on 22nd December 2017













108 and 102 Associates Felicitated by Sahas Dhamtari Youth Team at Chhattisgarh on 17th December 2017













Shri. Dr. Himanta Biswa Sarma Hon'ble Health Minister of Assam launched 95 New 108 Ambulances on 5th December 2017













Thiruvannamalai Maha Deepam at Tamil Nadu on 2nd December 2017



















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