

EM CARE

Towards saving lives and bringing hope



Spreading... **SMILE**

Partnering States and Union Territories



Towards Saving Lives and Bringing Hope...

Launched on 15th August 2005 in Hyderabad and expanded to 15 States and 1 Union Territory in India



83,29,471 CALLS ANSWERED EVERY DAY



34,20,652 EMERGENCIES RESPONDED PER DAY FLEET OF 8,521 AMBULANCES BY TRAVELLING DISTANCE OF 13,24,35,275 KM PER DAY 12,28,62,631 EMERGENCIES RESPONDED



74,76,979 LIVES SAVED SINCE INCEPTION. 6,69,014 DELIVERIES ASSISTED BY EMTS.



CONSISTENCY IN GROWTH AND DEVELOPMENT AT EMRI

Dear Team,

One more ECC was inaugurated in Tamil Nadu by the Honourable Health Minister and Minister for Micro, Small and Medium Enterprises on 17th July. In August 2024, 1st August '2024 was noted as ERC day in EMRI Green Health Services. Being an integral part of EMS, ERC plays a major role in providing services to the beneficiaries. 15 August was celebrated throughout EMRI Green Health Services with patriotic fervour.



EMRI collaborated with CMC Vellore to upgrade trauma care in TN and India. A formal MOU was signed on August 19th, 2024, to design patient-centred advanced trauma care training for doctors and nurses. This collaboration aims to strengthen ECC projects under EMRI.

To extend the services to the Animal husbandry of Tamil Nadu by adding 200 new 1962 mobile veterinary clinics by Hon'ble Chief Minister of Tamil Nadu Shri. M. K. Stalin on 20th August 2024. Team EMLC achieved a significant milestone by winning the first prize in SIMWAR at the American Heart Association's 100th anniversary conference, Resuscitation and Healthcare Quality Summit 27th -29th August 2024, held at HICC, Hyderabad. Gujarat EMRI Green Health Services has completed 17 years of providing EMS in the state of Gujarat and it was celebrated by recognizing the best employees department-wise and in operations.

On the 10th September 2024, the Hon'ble Chief Minister of Jharkhand Shri. Hemant Soren and Hon'ble Animal Husbandry Minister, Smt. Deepika Pandey Singh has flagged off 236 Mobile Veterinary Units (MVU) and Inaugurated 1962 Call Centre.

On 17th September 2024, a convocation ceremony was held for the 11th batch of the 2-year Postgraduate Program in Emergency Care (PGPEC) (Advanced EMT) at EMRI Green Health Services, Hyderabad. Thus, the quarter has once again proven consistent in growth and development in both human and animal care services.

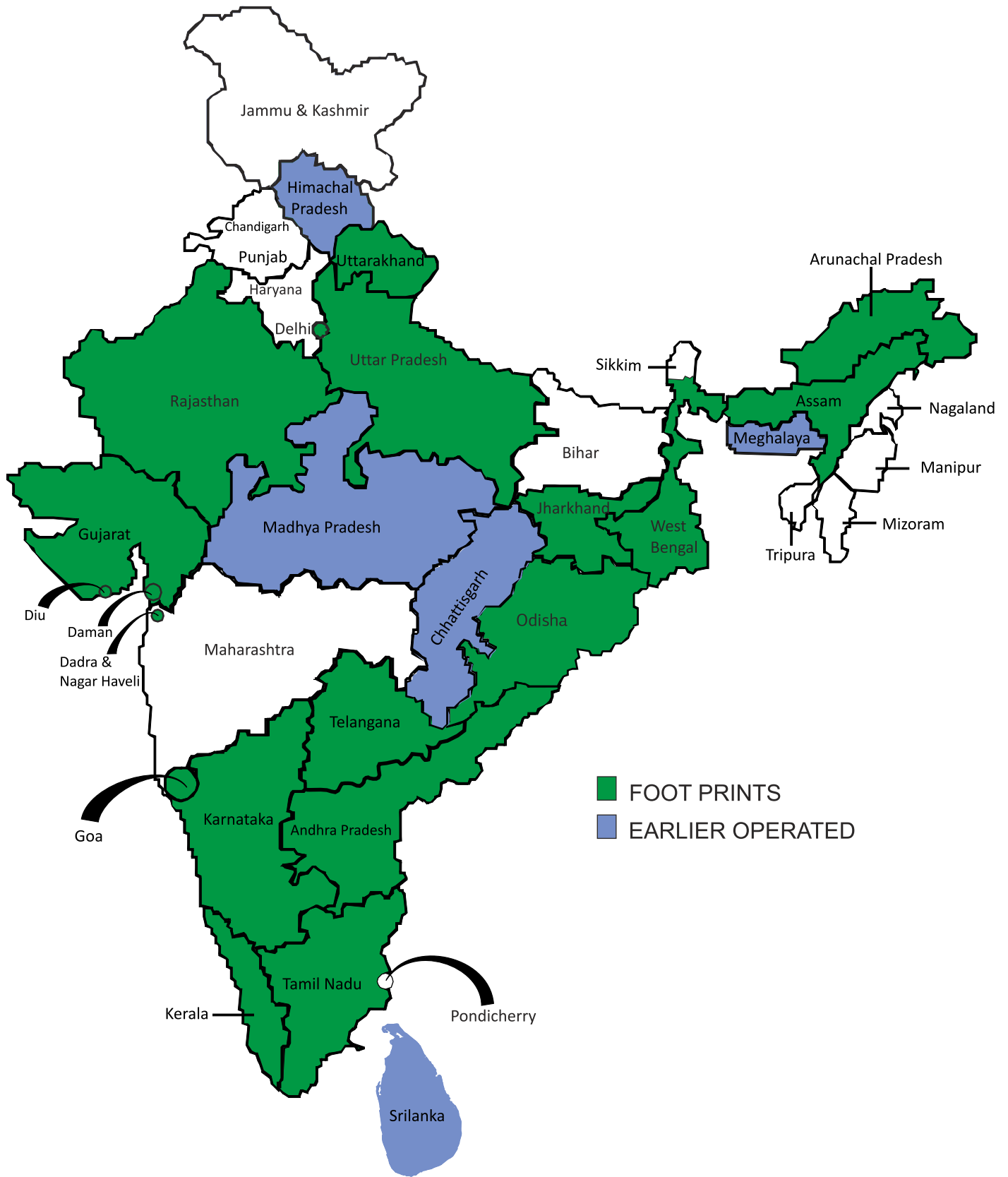
I extend my heartfelt congratulations to the exceptional teams of **Gujarat for July and August 2024 and Telangana for September 2024** for receiving the Life Saviour Award. Your unwavering dedication and commitment to saving lives have made a remarkable impact, and this recognition is a testament to your exceptional work.

With best wishes

K. Krishnam Raju

DIRECTOR - EMRI Green Health Services







- 108 Emergency Response Center handles over 250,000 calls daily.
- An impressive 97% of calls are answered within just 2 rings.



Neonatal Ambulance

- Initiated to lower neonatal mortality rates.
- Fully equipped (incubator- ventilator etc.) to facilitate the transfer of newborns between Special Newborn Care Units (SNCU) and Neonatal Intensive Care Units (NICU).



Drop-back Ambulance

- Initiated to reduce infant and maternal mortality rates
- These ambulances are designed to transport pregnant women, mothers and newborn babies from home to hospital and hospital to home in sterile and safe environment



Mobile Medical Unit (MMU)

- Mobile Medical Units (MMU) provide primary health care on wheels.
- Serve medical needs of individuals in remote areas



Boat Ambulance

- Introduced for rapid response to medical emergencies in riverine regions.

- Provide critical healthcare support during floods



Inter Facility Transfer (IFT)

- Primarily used to transit care patients from lower level to higher level hospitals in emergency situations.



Doli-palki

- This innovative approach is designed to carry emergency patients navigate hilly terrains or no road connectivity



- Health helpline services in non-emergency
- This telemedicine service offers information, advice, and counseling



- Implements “Dial 100 Police” service to combat crime and maintain societal peace and safety

- It uses advanced technology to analyze calls, enhance information for rapid response, facilitate follow-up and expedite information sharing to different levels of law enforcement & prompt response.



- "Call 181" - Women Helpline is a dedicated service aimed at assisting women in distress



- Mobile Veterinary Units accessed through 1962 toll free no. provides doorstep point-of-contact- care (POCC) for livestock and stray animals.

- MVUs with Hydraulic lift to carry animals to veterinary facilities in few states

Physical Progress

S. No	Name of the State Government	No of Ambulance	Emergencies Since Inception	Emergencies Attended in October 2023	Deliveries Assisted by EMT since Inception	Deliveries Assisted by EMT in October 2023	Lives saved since Inception	Lives saved in September 2023
1	Telangana	490	90,40,228	61,431	75,729	147	5,86,804	10,176
2	Gujarat	761	1,69,03,421	1,42,046	1,45,505	1,035	15,86,155	16,650
3	Goa	94	8,48,625	8,473	1,182	3	58,049	350
4	Tamil Nadu	1,394	1,70,48,041	1,62,822	70,535	176	14,43,884	17,408
5	Karnataka	715	1,13,64,522	62,729	59,672	151	8,88,660	9,599
6	Assam	800	68,42,824	35,271	54,288	148	2,12,099	1,020
7	Diu Daman & Dadra Nagar Haveli	22	4,52,175	4,188	1,678	11	25,140	492
8	Uttar Pradesh	2,200	3,63,27,556	5,90,321	95,546	22	7,08,917	-
9	Rajasthan	988	55,85,530	49,383	23,061	66	-	-
10	Kerala	316	9,96,496	16,107	108	-	-	-
11	Delhi	87	18,82,361	9,806	-	-	13,98,795	-
12	Arunachal Pradesh	110	23,747	737	77	1	-	-
13	Jharkhand	543	2,94,279	21,493	171	19	14,221	3,631
Total		8,520	10,76,09,805	11,64,807	5,27,552	1,779	69,22,724	59,326

108 State wise completed projects:

State	Project Tenure	Emergencies Handled	Assisted Deliveries	Lives saved
Meghalaya	Feb'2019-July'2022	2,34,017	2,552	27,439
Himachal Pradesh	Dec'2010 - Jan'2022	15,03,762	12,978	1,39,042
Madhya Pradesh	July'2009 - Sep'2016	37,82,608	27,505	98,251
Kerala	Apr'2014 - Nov'2015	73,143	34	-
Andhra Pradesh	Aug'2015-Dec'2017	72,66,356	70,531	2,72,891
Uttarakhand	May'2008-Apr'2019	13,87,711	15,075	33,458
Chhattisgarh	Jan'2011-Nov'2019	20,55,075	14,669	58,184
Total		1,60,68,655	1,40,792	6,01,826

Janani Shishu Suraksha Karyakram (Mother & Child)

S. No	Name of the State Government	No of Janani Ambulance as on October 2023	Janani Beneficiaries Since Inception	Janani Beneficiaries October 2023
1	Gujarat	414	1,19,90,457	1,60,510
2	Telangana	300	70,32,250	77,593
3	Uttar Pradesh	2270	9,17,78,963	14,05,263
4	Goa	4	10,071	100
5	West Bengal	932	46,99,067	65,776
6	Tamilnadu	108	19,11,361	26,394
Total		4,028	11,74,22,169	17,35,636
Per Day Calculation		55,988	Dispatches/ Day	

JSSK State wise completed projects:

State	Project Tenure	Emergencies Handled
Himachal Pradesh	Nov'2014 - Jan'2022	3,02,336
Assam	Jan'2012 - Dec'2022	24,90,035
Chhattisgarh	Jan'2012 - Dec'2022	69,38,307



108 Saviour of EMRI GHS - INDIA

JULY 2024	: GUJARAT TEAM	- A CASE OF COMPLICATED DELIVERY AND NEONATAL RESUSCITATION (NNR)	08
AUGUST 2024	: GUJARAT TEAM	- A CASE OF NEONATAL RESUSCITATION (NNR)	17
SEPTEMBER 2024	: TELANGANA TEAM	- A CASE OF NEONATAL RESUSCITATION (NNR)	25

STATE WISE CASE OF THE MONTH

JULY	: ASSAM TEAM – A CASE OF ELECTROCUTION	09
JULY	: GOA TEAM – A CASE OF SHORTNESS OF BREATH	10
JULY	: KARNATAKA TEAM – A CASE OF OP POISONING	11
JULY	: KERALA TEAM – A CASE OF COMPLICATED DELIVERY	12
JULY	: TAMIL NADU TEAM – A CASE OF SUICIDE ATTEMPT	13
JULY	: TELANGANA TEAM – A CASE OF RTA	14
JULY	: UTTAR PRADESH TEAM – A CASE OF ELECTROCUTION	15
AUGUST	: ASSAM TEAM – A CASE OF OP POISONING	18
AUGUST	: GOA TEAM – A CASE OF NORMAL DELIVERY	19
AUGUST	: KERALA TEAM – A CASE OF DROWNING	20
AUGUST	: TAMIL NADU TEAM – A CASE OF DROWNING	21
AUGUST	: TELANGANA TEAM – A CASE OF OP POISONING	22
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SEPTEMBER	: ASSAM TEAM – A CASE OF COMPLICATED DELIVERY	26
SEPTEMBER	: GOA TEAM – A CASE OF COMPLICATED DELIVERY	27
SEPTEMBER	: GUJARATH TEAM – A CASE OF NEONATAL RESUSCITATION (NNR)	28
SEPTEMBER	: KARNATAKA TEAM – A CASE OF RTA	29
SEPTEMBER	: KERALA TEAM – A CASE OF ANIMAL ATTACK	30
SEPTEMBER	: TAMIL NADU TEAM – A CASE OF RTA	31
SEPTEMBER	: UTTAR PRADESH TEAM – A CASE OF GUN SHOT	32

NOT FOR PROFIT ORGANISATION OPERATING IN PUBLIC PRIVATE PARTNERSHIP MODEL

Details of the incident:

On 16th July 2024, our Taluka Panchayat location received a call for Manjulaben Mal at around 8:25 am, who was a full term multipara and was in intense labor pains. EMT gave pre-arrival instructions and rushed to the scene.

Diagnosis or condition:

On arrival at scene, EMT found that mother had intense labor pains with leaking.

Pre-Hospital management:

EMT immediately transferred mother into the ambulance with the help of Pilot and relatives. After travelling for 1.5 km, EMT observed crowning so; EMT made all necessary preparations for assistance of delivery, turned on halogen lamp for warming and requested Pilot to park ambulance in

a safe place. EMT started assisting in delivery but as soon as baby's head was delivered, EMT observed turtle sign indicating shoulder dystocia. Hence, she delivered the shoulders by giving Knee-chest position, supra-pubic pressure & using Wood's technique with the help of Pilot and Asha. As baby was delivered, EMT found that baby was not crying and his face was cyanosed. EMT suctioned the airway, gave Newborn care and started BVM as his pulse rate was 80 beats/min. After 30 seconds of BVM, Baby's heart rate improved. Then, EMT started oxygen delivery to baby through blow by method. As placenta got delivered, EMT observed it carefully & suspected that some part of it was probably retained, so she contacted ERCP Dr Khemchand Parmar & as per his advice, EMT administered Inj. Oxytocin 10 IU and

IV RL 500. EMT assessed vital signs of mother which were as follows: Respiration Rate 24 breaths/min, Pulse Rate 120 beats/min, SpO2 92% and Blood Pressure 90/60 mm of Hg. Baby's APGAR had improved to 10.

Patient condition at the time of handing over:

After implementing all necessary interventions and with continuous monitoring patient was shifted to CHC Manavadar after travelling for a distance of approximately 12 km. At the time of handing over, both the mother and baby were stable.

Reflection of the patient or patient's relative:

Patient's relative whole heartedly appreciated the efforts given by EMT and Pilot.



REFLECTION BY EMT : PUNAM VAGHELA

"I am extremely happy and grateful as our case has been selected as savior for the first time. Our dreams have come true! We have worked very hard and put in all the efforts to save lives. I also thank my Pilot for helping me in this life saving mission as our team work definitely helped us in managing this challenging case."

REFLECTION BY PILOT : PRAKASH PARMAR

"I feel very proud and am unable to find the words to express my feelings for being selected as a Savior for the first time. I have been eagerly waiting since long for our work to be appreciated with a Savior Award. This encourages me to work enthusiastically and more confidently. I am very lucky to be associated with the EMRI GHS Organization."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : TALUKA PANCHAYAT,
KESHOD
CASE ID : 20240700127160
DATE : 16/07/2024
CALL TIME : 08:25 HRS
ERCPC : Dr. KHEMCHAND PARMAR
RECEIVING HOSPITAL : CHC MANAVADAR



Details of the incident:

Family member of a 75 old year victim of Kamrup Rural District called 108 Ambulance and after receiving the case ERO assigned the case to Mirza PS location, at 8.31 am. The team comprising of EMT Mr. Gopal Chandra Kalita and Pilot Mr. Tapan Chandra Das, rushed to the scene.

Diagnosis or condition:

Reaching the scene, EMT Mr Kalita saw, Ram Sebak Sharma, 75-year-old man was lying on bed and in semi-conscious mode. On the initial assessment EMT came to know that, Mr. Sharma, got an electric shock from an inverter at his residence in an waterlogged area early in the

morning. Mr Sharma was having breathing difficulties and on verbal conversation he was unable to talk and was not reacting to command properly. Observing his Critical condition, EMT and Pilot quickly shifted him to the ambulance. Vitals were monitored by EMT and recorded the vitals as, Body temperature = 98°F, BP- 160/90 mmHg, Pulse- 106/minutes, RR- 19/minutes, Spo2- 88%.

Pre-Hospital management:

EMT took ERCP advice from Dr. Dilip Sharma and immediately EMT kept Mr. Ram Sebak Sharma in the comfortable position and administered Oxygen as advised.

Patient condition at the time of handing over:

Vitals were constantly monitored by EMT during Enroute and recorded the vitals as Body temperature = 98°F, BP = 155/90 mmHg, Pulse- 109/minutes, RR- 20/minutes, Spo2- 93%. during handling over to Hospital. At Hospital Victim's condition improved a lot.

Reflection of the patient or patient relative:

Mr. Ram Sebak Sharma was in critical condition. His children praised the EMT as he could save the life of their beloved father.



REFLECTION BY EMT : GOPAL CHANDRA KALITA

"This is the case of an electrocution and such cases are very critical. Saving the life of such a person is a very wonderful experience for me. I really thank my organization for giving me such an opportunity."

REFLECTION BY PILOT : TAPAN CHANDRA DAS

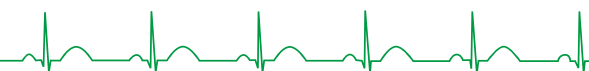
"I am thankful to God and EMRI Green Health Service for giving me the opportunity to be part of the team who are saving precious life of such a critical patient. I will contribute to such noble work by driving the ambulance in a proper and safe manner."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : MIRZA POLICE STATION
 CASE ID : 20240700087236
 DATE : 14-07-2024
 CALL TIME : 8.20 AM
 ERCP : Dr. DILIP SHARMA
 RECEIVING HOSPITAL : GMCH



A CASE OF SHORTNESS OF BREATH

JULY 2024

Details of the incident:

On 19th July 2024, at 19:10, Benaulim Ambulance received a call from 108 ERC stating that there was a patient with breathlessness. Our EMT and Pilot immediately rushed to the scene with the relevant equipments to provide necessary pre-hospital care. En route towards the scene, the EMT advised caller to keep the victim in a semi-fowler or fowler position.

Diagnosis or condition:

Ensuring scene safety and maintaining BSI precautions, our team reached the scene. Victim was a 44-year-old female. EMT began quick medical survey and found that the patient was breathless and was a known case of DM and HTN.

Pre-hospital management:

The EMT immediately initiated appropriate interventions. With the

help of the Pilot on duty, Patient was shifted in the Ambulance, oxygen was started and baseline vital signs were recorded as follows: Heart rate was 88 bpm, BP was 110/80 mm/Hg, SPO2 was 92%. EMT immediately called ERCP for medical advice. ERCP Dr. Alisha advised to give semi fowler position, administer Oxygen via NRBM and to insert an IV cannula. EMT started an intravenous (IV) line to provide access for medication administration and fluid resuscitation by ERCP guidance. EMT followed ERCP guidance and all the necessary interventions were given. Reassurance was given to the patient and her attender.

Patient condition at the time of handing over:

After implementing the necessary interventions and continuously monitoring the patient, EMT observed

an improvement in the patient's condition. The EMT ensured that the patient was secured on the stretcher and prepared for a smooth handover to the hospital staff upon arrival. On reassessment patients SPO2 increased up to 98%. Meanwhile ambulance reached the destination hospital at Margao. EMT handed over the patient to the emergency department. A follow up call after 48 hours confirmed patient was out of anger and on the path of recovery.

Reflection of the patient or patient relative:

With deepest sincerity, we want to thank the ambulance team for risking your lives for us day in and day out. Frontline workers like you deserve our respect, encouragement, and praise for doing what you do. Thank you!



REFLECTION BY EMT : DINESH KUMAR

"We have followed all the pre-hospital care protocols of medical emergency and carefully handled the case. It was a great satisfaction to me and my co-worker to provide the good pre-hospital care to him in a critical condition. On telephone the victim family members called our ambulance staff and expressed their gratitude and appreciation for providing the good timely services."

REFLECTION BY PILOT : RUPESH KHATEKAR

"Later, On telephone the victim family members called our ambulance staff and expressed their gratitude and appreciation for providing the good timely services."



CASE DETAILS

AMBULANCE LOCATION : BENAULIM
CASE ID : 20240700013509
DATE : 19/07/2024
CALL TIME : 19:10
ERCP : Dr. ALISHA
RECEIVING HOSPITAL : MARGAO



Details of the incident:

On 18th of July -2024 a staff of CHC Kaggalipura, Bengaluru called 108 Ambulance Service and informed that a 17-year-old female had taken poison and she was critical. She needs to be shifted to the higher care centre for further treatment. The case was assigned to the Kaggalipura CHC location ambulance, manned with EMT- Mr. Balesh N & Pilot- Mr. Shivakumar.

Diagnosis or condition:

When the 108 crew reached the CHC ward found that, 17-year-old female was in altered sensorium and restlessness. The staff of the hospital revealed that it was an OP poison taken 30 minutes before. The victim was shifted into the Ambulance by using a stretcher with the help of a Pilot. Assessed for ABC. Airway suction was done and oxygen was connected, Pulse rate showed Bradycardia. Baseline vitals were recorded and found to be Pulse: 46 bts /m, BP-80/50 mm of Hg, Respirations 36 breaths/minute, SPO2 80% and Pupils Constricted.

Pre-Hospital management:

In en route EMT monitored & reassessed ABC and vital signs. The victim became unresponsive, gasping and checked Carotid pulse was absent. Immediately He connected with ERCP Dr. Harsha and as per order, he started CPR until reaching the destination hospital. At the hospital, he checked her Vital signs and he was able to feel her Carotid & Radial pulse and with a Simple face mask her breathing was stabilized. EMT reassessed vital signs: The Pulse- was 52bts/min, Respiration was 24 breaths/min, & Blood pressure was not recordable, Spo2- 94%. ERCP Dr. Harsha was contacted & followed as per her instructions to provide pre-hospital care. Prehospital Management: 1. Oxygen 6 lts/minute. 2. IVF RL-20-drops/minute administered. 3. CPR given 4. Inj. Atropine 3mg was administered.

Patient condition at the time of handing over:

After implementing the necessary interventions and continuously monitoring the victim. EMT noticed an improvement in the patient's condition. The patient

appeared conscious & radial pulse was present. Vital signs, such as Pulse & breathing, stabilized. The EMT ensured that the patient was secured on the stretcher and prepared for a smooth handover to the hospital staff upon arrival. Then the patient was Shifted to the Dayanand Sagar Medical College Hospital, Bengaluru. Doctors appreciated EMT & Pilot for their job in saving the patient's life. In 48hrs follow-up Patient was stable & shifted to the General ward in the Hospital.

Reflection of the patient or patient relative:

The patient & their family member expressed gratitude for the EMT's prompt response and effective management of the victim. They appreciated the EMT's professionalism, calm demeanor, and the reassurance provided during a distressing situation. The patient & family member acknowledged the importance of the swift actions taken by the EMT, during the ambulance journey which contributed to save life of a young victim.



REFLECTION BY EMT : BALESH N

"It was a case of OP Poison with altered sensorium and enroute she was in gasping and started CPR and at destination hospital pulse & breathing is stabilized Pre hospital care Management was done. My Pilot Shivakumar supported during the emergency it was a great help in shifting the patient."

REFLECTION BY PILOT : SHIVAKUMAR

"I am happy to save the precious life & proud to be in EMRI Green Health Services of Karnataka."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : KAGGALIPURA CHC, BENGALUR DIST.
 CASE ID : 1888682
 DATE : 18-07-2024
 CALL TIME : 12:51PM
 ERCP : Dr. HARSHA
 RECEIVING HOSPITAL : DAYANANDA SAGAR MEDICAL COLLEGE HOSPITAL.



A CASE OF COMPLICATED DELIVERY

JULY 2024

Details of the incident:

Vettilapara ambulance was dispatched on response to a call regarding a still birth inside the tribal colony of Vettilapara, Thrissur district. The incident occurred in rural tribal residential area at approximately at 09:15 am on 08/07/2024. Ambulance reached the scene within 42 minutes of receiving the call.

Diagnosis or condition:

The EMT quickly assessed the patient's condition. Identified that client is in post-partum hemorrhage and possibility of hemorrhagic shock.

Pre-hospital management:

Patient was shifted into the ambulance with the help of Forest Officers and local resident team,

vitals checked. The saturation was 98%, Blood Pressure 100/60mmhg, Pulse Rare 60b/m, and the Respiration was 16 bts/m. After initial assessment EMT has started to provide pre hospital care enroute such as fundal massage, for bleeding control- applied pad, Administered IV fluids and provided comfortable position. Patient was shifted to Chalakudy THQH

Patient condition at the time of handing over:

After implementing the necessary interventions and continuous monitoring, the EMT assessed the Vital signs, such as blood pressure, heart rate and saturation. The EMT ensured that the patient was secured on the ambulance and given care according to that. EMT

prepared for a smooth handover to the hospital staff upon arrival.

Reflection of the patient or patient relative:

Patient family members expressed gratitude for the EMT's prompt response and effective management on the post-partum hemorrhage and further care until shifting the patient to the hospital. They appreciated the EMT's professionalism, good action to the emergency, and the reassurance provided during such a distressing situation. Family members acknowledged the importance of the swift actions taken by the EMT, which contributed to the positive outcome and alleviated their concerns during the ambulance journey.



REFLECTION BY EMT : AJITHA K MOHAN

"EMT Comment: It was a challenging case and we took extra care while handling this particular patient. The woman was bleeding while we arrived at the scene. But we gave the patient and her relatives reassurance and gave all the possible pre-hospital care to save her life. I feel proud that our timely intervention saved the life of the patient and we could shift her to the hospital safely."

REFLECTION BY PILOT : VISHNU V S

"This was a challenging case as the scene was in a remote tribal village and we had a difficult travel to reach there, yet we did our best to take the patient from the scene to the hospital without causing any delay, giving maximum care possible. We gave the required pre-hospital care to the patient by following all the protocols and shifted the patient on time to the hospital, thereby saving her life. Thanking EMRI GHS for allowing me to save the lives of others."



CASE DETAILS

AMBULANCE LOCATION : VETTELAPARA
 CASE ID : 20240700026629
 DATE : 08/07/2024
 CALL TIME : 09:15
 ERCP : Dr. ANAKHA SAJEEV
 RECEIVING HOSPITAL : CHALAKUDY THQH

PATIENT INCIDENT PRE HOSPITAL CARE PHOTO GRAPHS



Details of the incident:

On 15th July 2024, one of the family member’s called 108 Emergency Response Centre for a 32 years old male who involved in suicidal attempt. Due to personal issue, he became frustrated and consumed rat killer poison. meanwhile also he cut his wrist with a sharp object and hanged himself within a short period of time. Immediately our Emergency Response Officer assigned the case to Jagadevi PHC location ambulance for an instant support. Ambulance crew was reached the scene and rescued the victim with the help of family members.

Diagnosis or condition:

On reaching the scene, the victim was found and assessed the victim

that the victim was in an unconscious state. He had deep laceration in his wrist of right hand with severe bleeding, 3 episodes of vomiting and strangulation mark present in neck.

Pre-hospital management:

On initial assessment, the EMT positioned the victim, vital parameters were checked and recorded. HR- 124 bt/min, RR-18 br/min, BP-80/50 mmHg, RBS-126 mg/dl, Pupils-PERRLA and SPO2-59%. Airway management was done and high flow Oxygen was administered. IV Cannula 18G was inserted, C-Collar was applied to minimize the further cervical damage . Enroute to hospital, the victim went for cardiac arrest, 5 cycles of CPR initiated and checked

the pulse . On assessing the victim achieved Return of Spontaneous Circulation (ROSC) and administered emergency drugs as per ERCP advice. EMT obtained the ERCP advice and followed the same.

Patient condition at the time of handover:

At the time of handover, the patient was reassessed for further complication, vitals parameters were checked and observed as unstable. Victim was safely shifted to Government Medical College Hospital, Krishnagiri.

Reflection of the Patient's relative:

Patient's mother felt very happy for saved his son life on time with good care.



REFLECTION BY EMT : MEHARTAJ

“This case would be very challenging and very long last memory for us, its very difficult to manage the case at scene as he was very critical during reach. I have taken entire efforts to save his precious life.”

REFLECTION BY PILOT : ELAVARASAN

“The skills which I have learnt during my training period helped me a lot to handle knowledgeable.”



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : JAGADEVI PHC
 CASE ID : 2380880
 DATE : 15-7-2024
 CALL TIME : 22.05 HRS
 ERCP : Dr. KARTHICK
 RECEIVING HOSPITAL : GOVERNMENT MEDICAL COLLEGE HOSPITAL, KRISHNAGIRI



A CASE OF RTA

Details of the incident:

A 75-year-old man named Komuraiah was crossing the road at a petrol pump area in Hanmakonda town when suddenly a bus hit him and the old man fell down. The wheel in front of the bus ran over the old man's leg, so his foot was crushed and his body was bruised here and there. The foot was bleeding profusely. The bystanders immediately informed 108. 108 ambulance reached the spot in exactly ten minutes.

Diagnosis or Condition:

When the ambulance personnel arrived there, the old man was seated against a wall on the side of the scene. The old man was very lethargic and the foot was crushed and bleeding profusely. It was estimated that about 500 ml of blood flowed, and there was a pool of blood around the leg.

Pre-Hospital Care or Management:

On reaching the scene, the EMT, immediately wrapped the wound with large gauze pads and tried to stop the bleeding, but as it did not stop, the wound above area was tightly closed with a tourniquet. Then a splint is taken and the injured foot is supported from below and the injured person is taken to the ambulance by scoops stretcher. He was given oxygen, after checking all vitals HR-96 bt/min, RR-20 br/min, BP-110/70 mmHg, Pupils-PERRLA and SPO2-99%, contacted an online doctor and connected IV fluids. He was safely admitted to the MGM Hospital Warangal.

Patient condition at the Time of Hand over:

The Victim was taken safely to the hospital, the injured was taken to the

hospital bed on the collapsible stretcher, the manner of the accident, the injuries sustained by the accident, the vitals levels and the pre-hospital care given in the ambulance were given to the hospital doctor. After 48 hours we came to know that the victim was fine.

Reflection of the Patient or Patient relative/villagers and Hospital staff:

In the bus accident that happened to my father, 108 ambulance personnel reached there with a humanitarian attitude and immediately provided emergency treatment and admitted him to the hospital at the right time. My father is alive today only because of the help of 108 ambulances, always indebted to 108 services. Our Heartfelt thanks to 108 organizations.



REFLECTION BY EMT : R. YUGENDER

"I felt very sad when I saw the injured old man in that accident, I immediately reacted and tried all possible ways to save him, only because of the proper training I took I was able to save this old man. This case gave me great satisfaction."

REFLECTION BY PILOT : G. KOTI LINGAM

"I felt despondent when I saw that old injured man lying in a pool of blood. I cooperated with my EMT. We rushed him to the hospital and made sure that the treatment started quickly. I am grateful to our organization for giving us the opportunity to provide such services."



CASE DETAILS

AMBULANCE LOCATION : KUC HANAMKONDA
 CASE ID : 20240636194630
 DATE : 28/06/2024
 CALL TIME : 14:53
 ERCP : Dr. MANISH
 RECEIVING HOSPITAL : MGM HOSPITAL, WARANGAL

PATIENT INCIDENT, RECOVERY PHOTOGRAPHS, MEDIA CLIPPING AND APPRECIATION LETTER



Details of the incident:

43-year-old Ramprasad, a resident of Gaurav village of Halia police station area, was putting bamboo in the barn of his kutcha house when he got caught in electric shock. Hearing the screams, the brother of the young man reached the spot, switched off the power supply and informed ambulance service vehicle 108 to take the young man for treatment. EMT Santosh Bhartiya and Pilot Arun Kumar of the ambulance service vehicle who reached the spot brought the young man to the PHC Halia for treatment.

Diagnosis or condition:

Upon arriving on scene, the EMTs and Pilot assessed the situation. Ensuing Scene safety, Ambulance crew approaches patient who was suffering from an electrical shock and electrical burns to the right hand.

Pre-hospital management:

Following protocol, initial assessment was conducted. Patient was in altered mental state while Airway was patent and breathing was with normal rate but circulation seemed to compromise.

Considering criticality of the case, patient was shifted in to the ambulance for further evaluation and care.

Vital measurements were measured by EMT; baseline vital measurements of the patient were BP 90/40 mm/Hg, Pulse 52 beats/min, Respiratory rate 14 breaths/min and SPO2 90%. As the patient was in critical condition due to low blood pressure, low HR and compromised level of consciousness, ERCP was immediately contacted and with medical instruction from ERCP, EMT administered Inj. Diclofenac, Inj.

Dexamethasone, Oxygen and IV Fluid NS to the patient. The patient was shifted to CHC Halia Hospital with continuous monitoring of the patient and checking vitals in every 5 minutes.

Patient condition at the time of handing over:

Upon arrival at the hospital, the patient's condition had improved, as evidenced by stabilized vital signs and improvement in conscious level of the patient.

Reflection of the patient or patient's relative:

We thank the ambulance staff and the government to provide ambulance services in time. Ambulance staff was very supportive.



REFLECTION BY EMT : SANTOSH KUMAR BHARTIYA

"I have followed protocols that were taught during my refresher training session. It gives a lot satisfaction to serve the needy people."

REFLECTION BY PILOT : ARUN YADAV

"I drove the ambulance with the proper speed and arrived to the scene in given response time. Every day we learn new things and apply it to the upcoming cases."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : CHC HALIYA
 CASE ID : 195025
 DATE : 07-07-2024
 CALL TIME : 11:56 HRS
 ERCP : Dr. SURENDRA
 RECEIVING HOSPITAL : PHC HALIYA DISTRICT - MIRZAPUR



करंट की चपेट में आने से युवक झुलसा
 हलिया (मिर्जापुर)। स्थानीय ग्राम क्षेत्र के चौरवा गाँव में काल्पे मकान के बड़े में बंधस लगाते समय युवक करंट की चपेट में आकर झुलसा गया मौके पर पहुंचे भाई ने विद्युत आपूर्ति बंद कर युवक को उपचार के लिए एंबुलेंस सेवा वाहन 108 से प्राथमिक स्वास्थ्य केंद्र हलिया लेकर आया जहाँ पर चिकित्सक ने प्राथमिक उपचार करने के बाद मंडलीय चिकित्सालय रेफर कर दिया है। हलिया खान क्षेत्र के गौतम गाँव निवासी 43 वर्षीय रामप्रसाद अपने काल्पे मकान के बड़े में बंधस लगाकर रहा था कि करंट की चपेट में आ गया। चीख फुकार सुनकर मौके पर पहुंचे युवक के भाई ने विद्युत आपूर्ति बंद कर युवक को उपचार के लिए लिए एंबुलेंस सेवा वाहन 108 पर सूचना दिया मौके पर पहुंचे एंबुलेंस सेवा वाहन के ड्राइवरी संतोष भारतीय व पायलट अरुण कुमार ने युवक को उपचार के लिए प्राथमिक स्वास्थ्य केंद्र हलिया लेकर आये जहाँ पर चिकित्सक ने प्राथमिक उपचार करने के बाद मंडलीय चिकित्सालय रेफर कर दिया है।



AUGUST - 2024

Details of the incident:

On 20th August 2024, our Rajula team received a call for a full term multi gravida Mamtaben who had intense labor pain. Proper Pre-arrival instructions were given before reaching the scene.

Diagnosis or condition:

On arrival at scene, EMT found that baby was already delivered along with the placenta and was not crying and entire body was cyanosed.

Pre-hospital management:

EMT immediately suctioned the airway, provided routine newborn care and clamped & cut the umbilical cord. After finding no response from the baby, EMT checked the heart rate which was

very low and so, he immediately started CPR with BVM in neutral position and transferred the baby as well as the mother into the ambulance with the help of Pilot and relatives. In the ambulance, after few minutes of resuscitative efforts, EMT noticed that baby's heart rate increased to 86 beats/min so thereafter, EMT continued only BVM ventilation with high flow oxygen. After few minutes of BVM, on re-assessment, baby's heart rate had increased to 106 beats/min & RR was 34 breaths/min. Then, EMT continued Oxygenating the baby with Blow by Method and contacted ERCP Dr. Mihir Modi for online medical direction and as per his advice; EMT administered Inj. Oxytocin and RL

500 ml to the mother & kept oxygenating the baby.

Patient condition at the time of handing over:

After implementing all necessary interventions to newborn and with continuous monitoring, both mother & baby were shifted to SDH Mahuva. At the time of handing over, both the mother & baby were stable.

Reflection of the patient or patient's relative:

Patient's relatives whole heartedly appreciated the efforts made by EMT and Pilot that saved the lives of mother and the baby.



REFLECTION BY EMT : PRAVIN BAMBHANIYA

"I am extremely happy and grateful as our case has been selected as a Savior for the first time. Rewards are always delightful but saving a patient's life and bringing a smile on the faces of patient's relatives gives me greater happiness. I would like to thank God and our Organization for giving me this opportunity to save lives."

REFLECTION BY PILOT : GIRISH SONDHARVA

"I am extremely happy for being selected as a Savior. Contributing in this mission of saving lives is always amazing for me and I feel very happy and blessed. Good teamwork makes miracles."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : RAJULA
CASE ID : 20240800170155
DATE : 20/08/2024
CALL TIME : 21:19 HRS
ERCP : Dr. MIHIR MODI
RECEIVING HOSPITAL : SDH MAHUVA



A CASE OF OP POISONING

AUGUST 2024

Details of the incident:

Father of a 16 old year victim of Morigan District called 108 Ambulance and after receiving the case ERO assigned the case to Dharamtul Location, at 11.02 am. The team comprising of EMT Mr. Ajit Bora and Pilot Mr. Eunush Ali, rushed to the scene.

Diagnosis or condition:

Reaching at the scene, EMT observed a very panic situation at patient home. Miss Jesmin Begum aged 16-year-old young girl was lying on bed and in semiconscious mode. She had consumed insecticide due to mental pressure created by her family member due

to some personal reason. Miss Begum was continuously vomiting at that time also her pupils were constricted and reaction to light was Sluggish. She was unable to talk and was not reacting to command properly. Observing her Critical condition, EMT and Pilot quickly shifted her to the ambulance. Vitals were monitored by EMT and recorded the vitals as, BP- 110/80 mmHg, RR- 16/minutes, Spo2- 100%.

Pre-Hospital management:

EMT took ERCP advice from Dr. Dilip Sharma advised to provide Inj. Atropine and immediately EMT kept Miss Begum in the comfortable

position and gave Inj. Atropine as advised.

Patient condition at the time of handing over:

Vitals were constantly monitored by EMT during Enroute and recorded the vitals, BP = 115/90 mmHg, RR- 18/minutes, Spo2- 99%. during handling over to Hospital. During the Hospital reaching, Victim's condition was quite improved.

Reflection of the patient or patient relative:

Miss Begum was in critical condition. Her parents praised the EMT as he could save the life of their beloved Daughter.



REFLECTION BY EMT : AJIT BORA

"Managing poisoning cases are really challenging especially in such situation. I am happy being a part of EMRI Green Health in saving lives. Training given by EMLC was very helpful in handling poisoning cases and we are very thankful to organization that has provide us such standard training and high skills."

REFLECTION BY PILOT : EUNUSH ALI

"I am very happy to help my colleague who is engaged in the treatment of such critical case. Family member of the patient too were satisfied with our prompt service in shifting the patient to the nearest hospital. I feel proud to be associated with EMRI GHS."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : DHARAMTUL
 CASE ID : 20240800144744
 DATE : 24-08-2024
 CALL TIME : 11.02 AM
 ERCP : Dr. DILIP SHARMA
 RECEIVING HOSPITAL : MORIGAON CIVIL HOSPITAL



Details of the incident:

On 23rd August 2024 at 04:06, Cuncolim ambulance received a call from ERC stating that there was a case of a 26-year-old pregnant female with a chief complaint of severe abdominal pain and signs of labor at Dandora. EMT and Pilot rushed to the scene with the relevant equipment to provide necessary Pre-hospital care. En route towards the scene, the EMT advised the caller to keep the victim in the left lateral position. Ensuring scene safety and maintaining BSI precautions, our team reached the scene.

Diagnosis or condition:

The patient was found to be conscious and was on the bed. EMT began a quick medical survey and found that the patient was appearing weak. When history was taken, the EMT

found out that the patient was in primi gravida with strong uterine contractions. She had signs and symptoms of labor. EMT quickly called ERCP and as per ERCP advice. EMT started preparing for the labor case.

Pre-hospital management:

The EMT noticed the patient was in the crowning stage. EMT prepared for delivery of the patient. Under the guidance of ERCP, the patient was given a lithotomy position and IV access was done. Perineal support was given to prevent perineum tear. Delivery was conducted by an EMT. A healthy baby was delivered with an APGAR score of 9. Newborn care was given including drying, suctioning, cord cutting the umbilical cord, and APGAR. The Newborn was stable so EMT gave the newborn to the mother for kangaroo mother care. When the

vitals of the mother were checked, the EMT found that the mother's BP was 90/50. Immediately IV fluid was connected to the mother.

Patient condition at the time of handing over:

After implementing the necessary interventions and continuously monitoring the mother and newborn. Patient appeared more comfortable. Vital signs, such as blood pressure were within normal ranges. EMT gave hand over of the mother and baby in the emergency department of PHC Balli.

Reflection of the patient relative:

Thank you EMRI GREEN HEALTH SERVICES for saving lives of people. We greatly appreciate your service.



REFLECTION BY EMT : MAHENDRA MAURYA

"We feel very happy and Proud that we followed all the instructions, given timely and good Pre-Hospital Care and then carefully shifted both mother and newborn to the nearest hospital and this has given me great contentment."

REFLECTION BY PILOT : MANOHAR VELIP

"Later, we learned from the hospital team that the mother and the newborn were well cared for. They recovered completely and went home, for which we are very felt very happy and proud of it."



CASE DETAILS

AMBULANCE LOCATION : CUNCOLIM PHC
 CASE ID : 20240800021199
 DATE : 23/08/2024
 CALL TIME : 04:06
 ERCP : Dr. ASIF
 RECEIVING HOSPITAL : PHC BALLI

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE



A CASE OF DROWNING

AUGUST 2024

Details of the incident:

Vizhinjam CHC ambulance was dispatched to a call regarding Boat overturned Drowning. The incident occurred in at Vizhinjam old Wharf on Aug 21 2024, at approximately 1:21:28 PM. The ambulance reached at the scene within 04 minutes of receiving the call.

Diagnosis or condition:

The EMT quickly assessed the patient's condition. Patient was in altered sensorium, saturation fall, Hypothermia and dehydration. The EMT also noted that patient shows pale appearance.

Pre-hospital management:

Patient was shifted into the ambulance and monitored the vital signs. The saturation was 90%, Blood

Pressure 130/100mmhg, Pulse Rate 82b/m, and the Respiration was 20bts/m. realizing this, EMT has started to provide pre hospital care en-route such as comfortable position (Fowler's Position), Administrated Oxygen therapy 5L per hrs, IV line. Patient was immediately shifted to Medical College Hospital, Trivandrum.

Patient condition at the time of handing over:

After implementing the necessary interventions and continuously monitoring the patient, the EMT observed slight improvement in the patient's condition. The breathing problem became normal. Vital signs, such as blood pressure, heart rate and saturation became better. The EMT ensured that the patient was secured

on the ambulance and given care according to that. EMT prepared for a smooth handover to the hospital staff upon arrival.

Reflection of the patient or patient relative:

Patient family member expressed gratitude for the EMT's prompt response and effective management of the breathing and airway management. They appreciated the Pilot and EMT's professionalism, good action to the emergency, and the reassurance provided during a distressing situation. Family members acknowledged the importance of the swift actions taken by the EMT and Pilot, which contributed to the positive outcome and alleviated their concerns during the ambulance journey.



REFLECTION BY EMT : VINEESH M S

"It was a really challenging case and we took extra care while handling this particular patient. But we gave the patient and her relatives reassurance and gave all the possible pre-hospital care to save her life. I feel really proud that our timely intervention saved the life of the patient."

REFLECTION BY PILOT : RAJESH R S

"This was a really challenging case and we did our best to take the patient from the scene to the hospital without causing any delay, giving maximum care possible. Thanking EMRI GHS for giving me the opportunity to save the life of others."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : VIZHINJAM CHC
CASE ID : 20240800074016
DATE : 21/08/2024
CALL TIME : 1:21:28 PM
ERCP : Dr. ANAKHA SAJEEV
RECEIVING HOSPITAL : GOVT. MCH THIRUVANANTHAPURAM



Details of the incident:

On 14th August 2024, a Good Samaritan called our Emergency Response Centre and requested an Ambulance to rescue a victim of who was sank into a pool of drainage water about 10 feet depth. Immediately our Emergency Response Officer assigned the case to nearby Bodinayakanur GH location ambulance for the support.

Diagnosis or condition:

Ambulance reached the scene within few minutes and with the help of bystanders the victim was rescued successfully. While doing initial assessment, the victim is around 35 Yrs old Male, and he was responsive to verbal commands. Moreover, he presented with

multiple mild abrasions and shivering and also he was under the influence of alcohol intoxication.

Pre-hospital Management:

As an immediate intervention, the victim was placed in a supine position and a cervical collar was applied for the suspected spinal injury. Vital parameters were checked and recorded. HR-92bt/min, RR-18 br/min, BP-100/60 mmHg, SPO2- 96% Pupils Normal (PERL) Temp- 97.2°F and Blood sugar 144mg/dl. Patient was loaded into the ambulance through spinal board. IV cannulation done.

Enroute to hospital the EMT has obtained the online medical direction, administration of IV fluid

advice was given as per the protocol. The victim was administered with IV fluid.

Vitals were checked every 5 minutes, Patient was closely monitored to rule out any complications occurred in enroute

Patient's condition at the time of handover:

At the time of handing over, the condition and conscious level were remains same. He was safely admitted to Government General Hospital, Bodinayakanur.

Reflection of the Patient's relative:

Patient's mother felt very happy for saved his son life on time with good care.



REFLECTION BY EMT : YUVARAJA

"It was a unique case and the situation too. , we struggled a lot to rescue him from the drainage, and I thank 108 Ambulance service to provided me a opportunity to handle such cases."

REFLECTION BY PILOT : KARTHICK

"I felt very great to be a part of life saving services."



CASE DETAILS

AMBULANCE LOCATION : BODINAYAKANUR GH
 CASE ID : 2720267
 DATE : 14-8-2024
 CALL TIME : 17.30 HRS
 ERCP : Dr. SHIVANI
 RECEIVING HOSPITAL : GOVERNMENT GENERAL HOSPITAL,
 BODINAYAKANUR.

PATIENT INCIDENT PRE HOSPITAL CARE PHOTO GRAPHS



A CASE OF OP POISONING

AUGUST 2024

Details of the incident:

Bethi Sambaiah, 38 years of age, became depressed due to his severe financial problems and attempted suicide by consuming alcohol and pesticides from his crop field. While he was unconscious after drinking insecticide, the nearby workers noticed him and immediately informed 108 for help. 108 ambulance reached the spot in exactly 15 minutes and started emergency treatment.

Diagnosis or Condition:

The EMT who reached the scene saw the person in an unconscious condition and immediately placed him in the lateral position and first cleared the Airway. After knowing what kind of poison he had drunk, he left for the hospital from the place of the incident.

Pre-Hospital Care or Management:

As soon as the victim was taken into the ambulance, they started giving Oxygen at 10 liters per minute, then giving oxygen by suction, all the vitals were collected, Then the details of the vitals and the details of poison taken were collected and the doctor was contacted online, then as per the doctor's advice, injections of Rantac and Atropine were given and also saline started. Later, the victim was safely shifted to CHC Ethurunagaram Hospital.

Patient condition at the Time of Hand over:

As per the protocols, adequate pre-hospital care was provided and safely taken to the hospital, Vitals were checked once again and carefully handed over to the duty doctor. Later,

as the condition of the victim was critical, the victim was shifted to Warangal MGM Hospital. When we inquired after two days, we know that the victim had fully recovered

Reflection of the Patient or Patient relative / villagers and Hospital staff:

My name is Beti Sambaya from Narsimhasagar village On Sunday, when I tried to commit suicide by drinking weed poison, bystanders called 108 when they saw me in a disgusting state, and the ambulance staff gave me the necessary Injections, Saline, and Oxygen. I survived only because of the help of 108 staff.



REFLECTION BY EMT : ESLAVATH SIVA LINGAM PRASAD

"We have followed all the pre hospital care protocols of O.P Poisoning Emergency and carefully handled the case. It was a great satisfaction to me to provide good Pre-hospital care to him in a very critical condition. The victim's family members are expressed their gratitude and appreciation for providing quality and timely services."

REFLECTION BY PILOT : E. RAJESWAR

"We kept all the efforts and followed all protocols in shifting the victim It was a great satisfaction to help the victim in critical condition. we feel very happy while the family members are appreciating our efforts and service."



CASE DETAILS

PATIENT PRE HOSPITAL CARE, RECOVERY PHOTOGRAPHS, MEDIA CLIPPING AND APPRECIATION LETTER

AMBULANCE LOCATION : PHC MANGAPET
CASE ID : 20240836025219
DATE : 04/08/2024
CALL TIME : 13:54
ERCPC : Dr. DURGA PRASAD
RECEIVING HOSPITAL : CHC, ETURUNAGARAM



Details of the incident:

2 youngsters were met with an accident due bike skid. Bystanders called 108 and requested for help.

Diagnosis or condition:

Upon reaching the scene, the EMT and Pilot assessed the situation. The patient had a multiple injury (left leg open wound, and deep injury, fracture suspected) and profuse bleeding.

Pre-hospital management:

As per the protocol initial assessment, Patients were shifted inside the ambulance.

Airway breathing and circulation were assessed and bleeding was

controlled direct pressure followed by bandaging.

Vitals were measured by EMT, Patient's baseline vitals were BP 96/50 mm/Hg, Pulse 52 beat/minutes, respiratory rate 14 breath/minutes and 97% SPO2. As patient was critical immediately ERCP was contacted and with medical direction from ERCP, EMT given 0.5 ml Diclofenac injection IM and IV fluids (RL) were administered, and the leg was immobilized and control bleeding. With continuous monitoring of patient and taking in every 5 minutes patient was transported to CHC Lalganj Hospital.

Patient condition at the time of handing over:

Upon arrival at the hospital, the patient's condition had improved, as evidenced by stabilized vital signs.

Reflection of the patient or patient's relative:

While returning from the party, they were passing through Vallah Pahadi when the bike swerved to avoid an oncoming vehicle and fell on the road, leading to severe injuries. Ambulance staff helped us to save our lives.



REFLECTION BY EMT : SANTOSH KUMAR BHARTIYA

"Helping people in distress is my passion .It gives really satisfaction to me."

REFLECTION BY PILOT : ARUN YADAV

"Every day we learn new things and apply it to the upcoming cases."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : CHC LALGANJ
 CASE ID : 251760
 DATE : 09/08/2024
 CALL TIME : 4:14 HRS
 ERCP : Dr. SURENDRA DWIVEDI
 RECEIVING HOSPITAL : CHC LALGANJ DISTRICT - MIRZAPUR



SEPTEMBER - 2024

Details of the incident:

Madhavi from Yarsannapally village of Makthal mandal of Narayanapet district was admitted to the government hospital in the mandal center for her first delivery. There the medical staff on duty performed the delivery but the born baby was not breathing due to swallowing of amniotic fluid and was not crying immediately they informed to 108 Neonatal Ambulance for help.

Diagnosis or Condition:

After receiving the information, 108 personnel reached the hospital and after conducting a preliminary examination, the newborn baby was not conscious.

After noticing that baby was not breathing due to drunken amniotic fluid in the womb, he immediately started nasopharyngeal suction through bulb syringe and started Neonatal CPR.

Pre-Hospital Care or Management:

It was noticed that the baby was breathing after some time after starting the CPR, but immediately the baby started having fits, immediately the doctor was contacted by EMT on the phone and the Midazolam injection was given intravenously and the glucose levels of the baby were also checked and the baby was given D10 fluids and the baby's condition was carefully monitored and taken to the Mahabubnagar district hospital.

Patient condition at the Time of Hand over:

As per the protocols, adequate pre-hospital care was provided and safely taken to the hospital, Vitals were checked once again and carefully handed over to the duty doctor. The doctors on duty in the hospital and the relatives of the baby praised us a lot.

Reflection of the Patient or Patient relative / villagers and Hospital staff:

My name is Madhavi I thought my baby was almost dead in my first delivery but the 108 staff gave life to our hopes and gave life to my baby in the ambulance. Our heartfelt thanks to the 108 staff.



REFLECTION BY EMT : P. RAJ KUMAR

"I am happy to have saved the new born baby, I am very proud to have saved the life of the new born baby by assessing the condition of the new born baby at the right time and giving necessary care to them immediately and saving newborn baby life. My heartfelt thanks to all the EMLC team who trained us to do such a good job."

REFLECTION BY PILOT : C. SRINIVAS

"We kept all the efforts and followed all protocols in shifting the newborn baby. It was a great satisfaction to help the newborn baby in critical condition. We feel very happy while the family members are appreciating our efforts and service."



CASE DETAILS

AMBULANCE LOCATION : NARAYANAPET
CASE ID : 202436051641
DATE : 08/09/2024
CALL TIME : 11:59
ERCP : Dr. VINAY KUMAR
RECEIVING HOSPITAL : GGH MAHABOONAGAR

PATIENT RECOVERY PHOTOGRAPH AND MEDIA CLIPPING



A CASE OF COMPLICATED DELIVERY

SEPTEMBER 2024

Details of the incident:

Family member of a 30-year-old lady of Chirang District called 108 Ambulance and after receiving the case ERO assigned the case to JSB Civil New Location, at 8.14 am. The team comprising of EMT Mr. Jagadeep Sarma and Pilot Mr. Jwngsar Lahary, rushed to the scene.

Diagnosis or condition:

Reaching at the scene, EMT observed a very panic situation at patient home. Mrs Horbola Katun was lying on bed and in severe labor pain for 8 hours. On assessment EMT came to know that, in the ultrasound report it was mentioned that baby was in breech position also EMT found that one leg of the baby already came out of her vagina. Without delay, EMT immediately picked up her and ready to shift her to the hospital where surgery & CS (Caesarean Section) was available. But Enroute,

EMT observed that the other leg also came out of her vagina and was she was in abnormal labor pain. EMT got ready for delivery process with the KIT and full BSI precautions and asked his Pilot for further assistance who is full experienced in assisting EMT. Pilot stopped the vehicle and parked aside the road in safe area. After a few minutes of process a male baby was delivered but EMT found the Baby's neck was surrounded by the umbilical cord, so, immediately EMT removed umbilical cord from baby neck and completed the delivery with the help of pilot under the protocol. After delivery baby was not crying and no movement was seen, so immediately EMT prepared for baby's live saving process which included suctioning of mouth & nose, warming and removing meconium. After around 2 to 3 minutes newborn baby started crying. At scene Vitals of mother were monitored by EMT and recorded the

vitals as, BP- 145/85 mmHg, RR- 17/minutes, Spo2- 98%.

Pre-Hospital management:

EMT took ERCP advice from Dr. Dilip Sharma and as advised, EMT provide the Pre-Hospital Care and performed the baby's life saving process.

Patient condition at the time of handing over:

Vitals were constantly monitored by EMT during Enroute and recorded the vitals, BP = 130/80 mmHg, RR- 16/minutes, Spo2- 99%. during handling over to Hospital and Both Mother and Bay were safely admitted to the J.S.B Civil Hospital Kajolgaon.

Reflection of the patient or patient relative:

Mrs Khatun and her baby both were in critical condition. Her Family member praised the EMT as he could save the life of their beloved duo.



REFLECTION BY EMT : JAGADEEP SARMA

"Delivery cases are the most common one although we always give equal importance and concern to handle the case. My first role was to reassure the mother that I am trained enough for the assistance of delivery and boost the confidence of the mother. As a result, the delivery was successful and thanked to almighty for his support throughout."

REFLECTION BY PILOT : JWNGSAR LAHARY

"Assisting my fellow colleague EMT gives immense pleasure to be the part of the lifesaving process. Driving safely and quickly maintaining the minimal time of service become our main role and responsibility which I could perform it well."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : JSB CIVIL NEW, CHIRANG
 CASE ID : 20240900056887
 DATE : 10-09-2024
 CALL TIME : 8.10 AM
 ERCP : Dr. DILIP SHARMA
 RECEIVING HOSPITAL : J.S.B CIVIL HOSPITAL, KAJOLGAON



Details of the incident:

On 14th September 2024 at 09:29, Madkai ambulance received a call from ERC stating that there was a case of a 22-year-old pregnant female with a chief complaint of severe abdominal pain, 38 weeks of gestation, leaking PV with meconium stain and severe anaemia. EMT and Pilot rushed to the scene with the relevant equipment to provide necessary Pre-hospital care. It was an IFT case of a G2P1 patient from SDH Ponda to GMC Bambolim. Ensuring scene safety and maintaining BSI precautions, our team reached the hospital and after taking the handover patient was shifted an ambulance.

Diagnosis or condition:

EMT monitored vital signs. The patient was having continuous contractions. On vaginal examination of the

patient, EMT examined a gush of bleeding with a meconium stain. She had signs and symptoms of labor. The patient's vitals were normal. The EMT noticed patient was in the crowning stage.

Pre-hospital management:

Without wasting time, EMT prepared for delivery of the patient. Under the guidance of ERCP, Patient was given a lithotomy position and IV access was done. Perineal support was given in order to prevent perineum tear. Head of the baby was delivered but the body was struggling to come out. On neck examination, EMT observed a loose loop of nuchal cord. EMT removed with the help of 2 fingers and delivery was conducted by EMT. A healthy baby girl was delivered with an APGAR score of 10. Oxytocin was given to the patient. Newborn care was given including drying,

suctioning, cord cutting, APGAR. Newborn was stable so EMT gave the newborn to the mother for KMC.

Patient condition at the time of handing over:

After implementing the necessary interventions and continuously monitoring the mother and newborn. Patient appeared more comfortable. Vital signs, such as blood pressure were within normal ranges. EMT gave hand over of the mother and baby in the emergency department of GMC.

Reflection of the patient:

I want to thank you from the bottom of my heart for the warmth with which you treated me to good health and thank you for the normal delivery of my healthy baby girl. May God bless the ambulance team. Thank you EMRI GREEN HEALTH SERVICES for saving lives of people.



REFLECTION BY EMT : ANJU NAIK

"On the scene as per the information of family members about the pregnant woman's position, we thought that she would not progress further and deliver in the ambulance. As it was a natural process the delivery progressed we conducted the delivery very carefully and helped the cord around the neck the newborn with newborn care as per protocols. The Hospital personnel appreciated us a lot for which we are very proud of."

REFLECTION BY PILOT : DATTARAM DESSAI

"Victim family members and the Hospital staff appreciated our services for good Pre-Hospital Care praised our sincere efforts in handling such a complicated case of cord around the neck the pregnancy case"



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : PHC MADKAI
 CASE ID : 20240900012564
 DATE : 14/09/2024
 CALL TIME : 09:29
 ERCP : Dr. NAVJYOT
 RECEIVING HOSPITAL : GMC



A CASE OF NEONATAL RESUSCITATION (NNR)

SEPTEMBER 2024

Details of the incident:

On 28th August 2024, our Nadiad City 1 location received a call from Tehsildar for Hinaben Raval at around 7:06 am, who was a full term primi gravida with intense labor pains. EMT gave pre-arrival instructions to give her left lateral position, to not to give her anything orally & to keep all her medical documents ready whilst they rushed to the scene. On that day there was very heavy rainfall and the Shedhi River was overflowing so the incident area was flooded with water that made it impossible for the ambulance to reach to the scene. So our 108 ambulance took help from SDRF team & traversed in a boat for 4 km towards the scene. But for remaining 3 km, it was not possible to go towards the scene in a boat as the water level was quite low and therefore EMT, SDRF team and the Sarpanch had to go on-foot through the water-flooded area whilst also carrying the boat on their shoulders to reach the scene.

Diagnosis or condition:

On arrival at scene, EMT found that

delivery was already assisted by Asha worker & patient's relatives had loaded the mother onto a cot while the baby was being carried by his father.

Pre-hospital management:

EMT immediately took the baby from the father and covered him properly as baby's skin was very cool suggesting hypothermia. Again they had to walk back on-foot for 3 km through the water-flooded area whilst carrying the mother & baby as well. Thereafter they transferred the mother & the baby into the boat. Whilst traversing in the boat towards the ambulance, EMT assessed baby's vitals & found that baby had peripheral cyanosis & bradypnoea, so he started Bag Valve Mask ventilation. On reaching their ambulance, they transferred the baby along with the mother into the ambulance. EMT turned on halogen lamp for warming and continued BVM with high flow oxygenation. EMT also assessed vital signs of mother and it were as follows: PR 164 beats/min, RR 22 breaths/min, BP 138/70

mm of Hg. Baby's vital signs were as follows: PR 172 beats/min, RR 24 breaths/min and Temperature 94.3-degree F. EMT contacted ERCP Dr Khemchand Parmar & as per his advice, EMT administered Inj. Oxytocin 10 IU, IV fluid NS to the mother and continued BVM for the baby.

Patient condition at the time of handing over:

After implementing all necessary interventions and with continuous monitoring patient was shifted to General Civil Hospital, Nadiad after travelling for a distance of approximately 10 km. At the time of handing over, both the mother and baby were stable.

Reflection of the patient or patient's relative:

Patient's relative whole heartedly appreciated the efforts given by EMT and Pilot.



REFLECTION BY EMT : DHARMENDRA JADAV

"I am extremely happy to be selected as a Savior for the first time. I would like to thank our Organization for giving me this opportunity to save lives, even in difficult situations such as floods. This recognition motivates us to work even more passionately. Good teamwork makes miracles."

REFLECTION BY PILOT : JAYESH PRAJAPATI

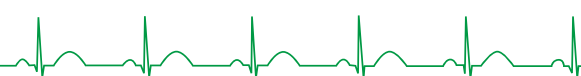
"I feel very proud and am at a loss for words to describe my feelings for being selected as a Savior for the first time. I am thankful to everyone who considered me to be worthy of participating in this life saving mission. I feel very lucky to be associated with this prestigious Organization."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : NADIAD CITY 1
 CASE ID : 20240800236498
 DATE : 28/08/2024
 CALL TIME : 07:06 HRS
 ERCP : Dr. KHEMCHAND PARMAR
 RECEIVING HOSPITAL : GENERAL CIVIL HOSPITAL, NADIAD



Details of the incident:

On 05th September 2024 at 8:29am, Emergency Response Center (ERC) received a call from a good Samaritan from Manvi taluk main road near Kapagal village at bypass which is under construction of Raichur District, who was very frightened and requested for an ambulance urgently, on asking about case details our Emergency Response Officer (ERO) that the victims were school children, met with an accident which was a rear right lateral collision between the school bus & a KSRTC bus. The nearest available ambulance was Manvi 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 ambulance with EMT Mr.Veeresh and Pilot Sharanappa on duty and they reached the victim location which was 9 km's away within 13 minutes of duration.

Diagnosis or condition:

When the 108-crew arrived at the scene EMT found that it was a multi casualty

incident & the victims were all school students who were severely injured few of them had multiple amputated limb injuries where the other had head injuries few among them were conscious, semi-conscious, & unconscious. It was very challenging for the crew to handle such victims & anxious crowd who had witnessed the breath taking event. The incident was handled by 108 crew in a calm & composed professional way while dealing all the victims. Parents of all the victims were provided with assurance of speedy recovery of their injured children.

Patient Management:

Without delaying EMT & Pilot started shifting the critically injured young victims by means of scoop & spine board & simultaneously instructed to on lookers to call for additional ambulances. Open fractures, bleeding injuries, amputated limbs and irregular laceration with severe bleeding were treated wound care was done en route. Meanwhile other ambulances received the other victims & all were shifted to RIMS district hospital.

EMT had performed & assessed the successful triaging of all the victims. Vitals were not recorded as it was difficult to shift all the victims. Meanwhile ERCP Dr. Monika was briefly described the event.

Patient condition at the time of handing over:

Hospital doctors appreciated EMT & Pilot for their presence of mind and the accurate pre hospital management which was given to the victims on scene & in the ambulance before reaching to the hospital. The victims were immediately attended by a Team of Doctors for further evaluation of the victim's condition.

Reflection of the patient or patient relative:

Victim's parents & relatives & few of the on lookers showered blessing and showed gratitude towards our ambulance team. Condition of the victims were stable during 48 hour follow up call. Few of the Victims were shifted to the higher facility center for further surgical care.



REFLECTION BY EMT : VEEREESH

"It was very challenging case to me and I felt very much satisfied after shifting the victims to the hospital within golden hour. It gives tremendous pleasure to serve people when they are in need of our help & support. I am thankful to EMRI GHS for giving me an opportunity to save the life of a needy. Honesty & integrity are the best essence of satisfied life which I felt after handing over the young lives safely. It was a great satisfied feeling to my Soule."

REFLECTION BY PILOT : SHARANAPPA

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



CASE DETAILS

PATIENT INCIDENT, RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : MANVI
CASE ID : 2331657
DATE : 5-09-2024
CALL TIME : 08:29AM
ERCP : Dr. MONIKA
RECEIVING HOSPITAL : RIMS TEACHING HOSPITAL
RAICHUR6



A CASE OF ANIMAL ATTACK

SEPTEMBER 2024

Details of the incident:

Devikulam (Marayoor) ambulance was dispatched to respond to a call regarding an Elephant attack. The incident occurred in Pambumpara, Marayoor which is 15 km away from their base at 07.22 AM. The ambulance reached the scene within 24 minutes of receiving call.

Diagnosis or condition:

The EMT quickly assessed the patient's condition, the victim had just escaped from a wild elephant attack with Injuries. Identified a lacerated open wound over the right thigh and an Injury in the lower abdomen.

Pre-hospital management:

The patient was shifted into the ambulance, and the EMT monitored the vitals. The saturation was 96%, Blood Pressure 140/90mmhg, Pulse

Rate 68b/m, and Respiration 24bts/m. Realizing this, the EMT started to provide pre-hospital care en route, such as pressure bandaging for bleeding control, given Fowler's position. The patient was immediately shifted to Sahayagiri Hospital Marayoor.

Patient condition at the time of handing over:

After implementing the necessary interventions and continuously monitoring the patient, the EMT observed slight weakness in the patient's condition. The patient became tired, there was excessive bleeding, and the patient appeared more distortable. Vital signs, such as blood pressure, heart rate, and saturation, were falling down. The EMT ensured that the patient was secured in the ambulance and given

care according to that. The EMT prepared for a smooth handover to the hospital staff upon arrival.

Reflection of the patient or patient relative:

Patient family members expressed gratitude for the EMT's prompt response and effective management of bleeding control measures and care en-route. They appreciated the EMT's professionalism, good action to the emergency, and the reassurance provided during the distressing situation. Family members acknowledged the importance of the swift actions taken by the EMT and Pilot, which contributed to the positive outcome and alleviated their concerns during the ambulance journey.



REFLECTION BY EMT : SAMEESH MARKOSE

"It was a really challenging case and we took extra care while handling this particular patient. We gave all the possible pre-hospital care to save his life. I feel really proud that our timely intervention saved the life of the patient."

REFLECTION BY PILOT : SIBIN SEBASTIN

"We took the patient from the scene to the hospital without causing any delay, giving maximum care possible. Thanking EMRI GHS for giving me the opportunity to save the life of others."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : MARAYOOR
CASE ID : 20240900087122
DATE : 23-9-2024
CALL TIME : 7:22 AM
RECEIVING HOSPITAL : SAHAYAGIRI HOSPITAL MARAYOOR



Details of the incident:

On 18th September 2024, a Good Samaritan called our Emergency Response Centre and requested an Ambulance to rescue the person who was struck by a moving train near Bommidi Railway Station and sustained serious injuries. Immediately our Emergency Response Officer assigned the case to nearby Pappireddipatti location ambulance for the support.

Diagnosis or condition:

Ambulance reached the scene within few minutes and found a 33 years old male who was severely injured after being hit by the train and struck at scene. On initial assessment, he was conscious and oriented and he had complete amputation injury in his right hand with gush of bleeding.

Pre-hospital Management:

On the basis of improving the patient condition, he was placed in a supine position and wound washed with normal saline, the uncontrollable bleeding was arrested with tourniquet dressing, Vital parameters were checked and recorded. HR- 104bt/min, RR-20 br/min, BP- 90/60 mmHg, SPO2- 94%, Pupils Normal (PERRLA) Temp- 98.6°F. IV Cannula insertion done, administered Oxygen and triaging done. The patient was loaded into the ambulance for further support. Enroute to hospital the EMT obtained ERCP advice, administered IV fluids as per the protocol. Amputated part was placed in a sealed plastic bag and secured in a appropriate manner and Vitals were checked every 5 minutes, Patient was reassessed and continuously

monitored to rule out any enroute complications.

Patient's condition at the time of handover:

At the time of handing over, the patient was conscious and vital parameters were unstable. Amputated part was also handed over to the staff and documented as per the protocol. He was safely admitted to Government Medical College Hospital, Dharmapuri.

Reflection of the Patient's relative:

Patient relative appreciated our associates for their prompt action in order to saving the patient life on time and they thanked 108 Ambulance service for provided a great support in difficult situation.



REFLECTION BY EMT : BAYASH

"At scene, the patient was in very critical condition, we managed the case by providing a good pre hospital care. I would thank to my PILOT for the support in shifting and admitting the patient patient to hospital on time."

REFLECTION BY PILOT : HANIFA

"It gives me the realization about I am working in the noble profession of life saving services."



CASE DETAILS

PATIENT INCIDENT, RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE

AMBULANCE LOCATION : PAPPIREDDIPATTI GH
 CASE ID : 3174493
 DATE : 18-9-2024
 CALL TIME : 12.53 HRS
 ERCP : Dr. VENNILA
 RECEIVING HOSPITAL : GOVERNMENT MEDICAL COLLEGE HOSPITAL, DHARMAPURI.



A CASE OF GUN SHOT

SEPTEMBER 2024

Details of the incident:

108 ERC received a call to transfer a gunshot injuries patient for Maharani Lakshmi Bai Medical College, Jhansi. An ambulance was dispatched to the immediately to assist this critical patient

Diagnosis or condition:

Upon reaching the scene, the EMT and Pilot assessed the situation. The patient had multiple gunshot wounds in his abdominal cavity with significant bleeding. The patient was restless due to pain.

Pre-hospital management:

As per the protocol initial assessment, Patients were shifted inside the ambulance. Airway breathing and circulation were assessed and Vitals were measured by EMT, Patient's baseline vitals were BP 146/100 mm/Hg, Pulse 84 beat/minutes, respiratory rate 18 breath/minutes and 97% SPO2. As patient was critical immediately ERCP was contacted and with medical direction from ERCP, EMT given IV fluids (RL) and fluids (NS) were administered. With continuous monitoring of patient and taking in every 5 minutes' patient was

safely transported to Maharani Lakshmi Bai Medical College, Jhansi.

Patient condition at the time of handing over:

Upon arrival at the hospital, the patient's condition had improved, as evidenced by stabilized vital signs.

Reflection of the patient or patient's relative:

He was safely admitted to Maharani Lakshmi Bai Medical College, Jhansi, where the patient is undergoing treatment and now the patient's condition is improving.



REFLECTION BY EMT : ANIRUDDH

"I have followed protocols that were taught during my refresher training session .It gives a lot satisfaction to server the needy people."

REFLECTION BY PILOT : SUNIL KUMAR

"I drove the ambulance with the proper speed and arrived to the scene in given response time. Every day we learn new things and apply it to the upcoming cases."



CASE DETAILS

PATIENT RECEIVING PRE-HOSPITAL CARE IN 108 AMBULANCE & MEDIA CLIPPING

AMBULANCE LOCATION : PHC AATA
 CASE ID : 940693
 DATE : 30/09/2024
 CALL TIME : 17:13 HRS
 ERCP : Dr. SHAIENDRA
 RECEIVING HOSPITAL : MAHARANI LAKSHMI BAI MEDICAL COLLEGE, JHANSI



CPR Awareness Day on 27th July 2024



American Heart Association's 100TH Anniversary Conference: EMRI GHS Secures First Prize in SIMWAR CCF Competition



Hon'ble Chief Minister of Jharkhand Shri. Hemant Soren and Hon'ble Animal Husbandry Minister, Smt. Deepika Pandey Singh have flagged off 236 Mobile Veterinary Units (MVU) and Inaugurated 1962 Call Centre on 10th September 2024



78th Independence Day Celebrations on 15 August 2024



Hon'ble Chief Minister of Tamil Nadu Shri. M. K. Stalin launched Additional 200 New 1962 Mobile Veterinary Clinics on 20th August 2024



PGPEC (Advanced EMT) 11th Batch Convocation Ceremony on 17th September 2024



Hon'ble Minister for Health and Family Welfare Government of Tamil Nadu
Shri. Ma. Subramanian and Hon'ble Minister for Micro, Small and Medium Enterprises
Shri. T.M. Anbarasan Inaugurated new Emergency Care Center on 17th July 2024



17th Anniversary Celebrations at Gujarat on 29th August 2024





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