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## Transport and prehospital care prior to arrival in tertiary care emergency department of Eastern Nepal: A cross-sectional study

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**Introduction:** BP Koirala Institute of Health Science, Dharan provides a tertiary level of care to a population covering the eastern part of Nepal and also to adjoining states of India. The total number of Emergency admission is around 37800. Thus, providing the definitive surgical and medical care to the population of this region. Nepal is unique in its mountainous terrain and the length of time taken by the patients to get medical help is often too long, with added woes of inadequate road linkages which are rough and impassable during most of the year. Transport may not exist or are unreliable and irregular.

**Materials and Methods:** This is a prospective observational study done on 2211 patients by convenient sampling arriving in the emergency ward of BP Koirala Institute of health science over a period of one month. A pre-tested validated questionnaire was distributed among the patient or their relatives and their responses were collected. The questionnaire consisted of their demographic profile, their preferred mode of transport, reasons for choosing the same, equipment and presence of trained person present in them. It is also explored their approximate cost, distance and time taken by the ambulance to reach the hospital. These data were analyzed in SPSS software version 11.2.

**Result:** Out of the 2211 patients presented in emergency ward 43.2% (955) arrived ambulance. Other means of transport used by them were 2.2% (Taxi), 4.3% (Auto rickshaw) and 49.3% (Private vehicles). Patients with triage score of 2 arriving in the ambulance were 27.6% only. The median time taken by ambulance is 2 hours and the Interquartile range of 1 to 3hours. The median distance covered is 55km with an Interquartile range of 38 to80 km. The median cost born by the patient was 3500 Nepalese rupees with an Interquartile range of 2000 to 6000 Nepalese rupee. Their reason for not choosing ambulance for transport was 26% (Can't afford), 13.8% (Easily available), 14.7% (Private vehicle at home) and 2.4% (Near to hospital). Only 29.4% of all the patients arrived in the emergency have received pre hospital care.

**Conclusion:** Our study concluded the preference of private vehicles by patients arriving in the emergency ward of this hospital having high acuity triage score (ATS 2). Although patients using the ambulance as one of their means of transport were expensive with not much of the required facility in them or any trained paramedics in them. Thus the idea of using an ambulance for patient's transport needs further education among our Nepalese population.

## **Biography**

Sonai Chaudhuri Giri, has been working as a full time consultant in the Department of General Practice and Emergency Medicine in BP Koirala Institute of Health Sciences since 2013. She had completed her medical education in the same institute. She is motivated to develop Emergency Medicine in Eastern Nepal and further enrich herself with recent advances in this field. She has been teaching undergraduate medical students and post graduate residents in this institute.

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