**LESSONS FROM A MEDICAL EMERGENCY EXPERIENCE IN SUVA FIJI**

**&**

**MEDICAL EMERGENCY CHECKLIST (attached)**

By John & Wendy Taylor, SV Midnight Sun; 10/8/15

Confession time!

After having cruised the SW Pacific Islands for 20 years, we recently became involved in a medical emergency and air ambulance evacuation (medevac) for a coincidentally holidaying family member. It became apparent how ill equipped we were, should a medical emergency befall one or both of us while cruising the tropics. Medevac includes a Doctor & nurse on an ambulance plane.

We learnt many lessons and have compiled **a “check list”** which follows on the next page and which some may find helpful.

The most valuable lesson we learnt was the importance of a coordinator or “Guardian Angel”, for the patient and who will lift heaven and earth to ensure “survival and immediate air ambulance evacuation”. Survival and Evacuation do not happen by themselves. Someone has to make it happen and a checklist helps in a time of urgency and stress.

In the case of **a serious illness**, one day in a 3rd world Hospital is one day too long. Death is part of life, but all too easy and accepted in 3rd world countries. Infection is rife & travellers in foreign places often have poor immunity to local infections.

Our experience;

* Patient had a heart attack on a cruise ship & was admitted to the Suva Private Hospital, the best in Fiji we were told.
* The Hospital is “poor”, by our fortunate Western standards.
* Specialists are in short supply – there is no cardiologist in Fiji.
* Even basic equipment is lacking (a stretchy rubber glove used as a tourniquet to find a vein!)
* Hygiene as we know it in the “Intensive Care Unit” was lacking
	+ Spiders running under the ward bed
	+ Mosquitos evident even during daytime
	+ Bandages repeatedly touched on the sterile side
	+ Pillows & blankets which fell on the floor returned to the patients bed
	+ I saw 3 needles dropped onto the floor
* Tubes fallen out of intravenous needles
* Nurses not in attendance in the Intensive Care Unit (I had to assist a patient to sit up who was choking)
* Visitors arrived at any time despite visiting hour’s notices & despite being an “Intensive Care Unit”.
* Private Hospitals in 3rd world countries require rapid approval of medical insurance. They are on a shoe string budget. If paying cash, advance payments are required for non-nationals starting with the “admission deposit” (eg 3,000 FJD). The detailed weekly quote for Intensive Care was 24,000 FJD.
* “Comprehensive” Travel Insurance may not include “private hospital cover” unless a private hospital extension is taken out - the fine print, (as in our case)! – this means off to the public system & in Fiji you don’t want that, so you pay or surely die.
* Air ambulance evacuation is amazingly rapid and efficient, but someone has to get quotes, fill out forms, provide insurance details and make it happen. Insurance Companies generally get the Medevac quotes & fill out the forms, but they need information & pushing, to make it happen (eg from the patient’s Guardian Angel).
* With Travel Insurance, the Insurance Company exists to make a profit & will not approve Medevac easily. The patient has to be medically fit to travel (stable), but at risk of dying for medevac approval?? Phone your insurance company with a “what if” injury & ask if medevac would be approved. The Insurance Company’s medical team makes the decision based on the medical report. I spoke with a medical team member who would not give me a “yes/no” answer to a “what if” scenario, she had never visited a 3rd world Hospital & was horrified with the hygiene I described. You may need your Guardian Angel to argue very strongly for you & to ensure the medical report from the 3rd world country Doctor is what will get medevac!
* If not insured & not prepared, the Guardian Angel should expect 40 or more emails & a dozen international phone calls.
* Best air ambulance evacuation quote for Suva to Adelaide was 89,000 AUD & without insurance, full payment is required before the mission commences.
* Also, the receiving Hospital and Admitting Doctor’s details are required before the mission commences
* Suva private hospital is required to inform relevant Embassies for non-national patients. (but in our case never did)

A Check list for the “Traveller” and “Contact person” follows

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**MEDICAL EMERGENCY CHECK LIST**

**for**

**“TRAVELLER” & “CONTACT PERSON”**

**(when travelling in 3rd world countries)**

**Traveller ‘s Check List;**

* Prepare an **“In case of Medical Emergency document”** to be carried on your person whenever travelling & include;
	+ Persons to be Contacted (name, phone number and email address) - (eg family or close friends).
	+ Copy of travel medical Insurance certificate if insured. Add the “**emergency medical Insurance Hotline Ph No**. (not included on our certificate) & include name of issuing agent and phone number – insurance companies can be impersonal, argue re costs, question whether medevac is truly necessary, require additional quotes etc. Know your agent, he may be able to assist in getting a better & faster response).
	+ Name, nationality, passport number, expiry date, date of birth (you could be leaving without your passport (eg hidden in the boat/luggage somewhere & you are unable to explain where it is!)
* Provide a copy of **“In case of Medical Emergency documents”** to each contact person (***your Guardian Angel who will coordinate the emergency & lift heaven and earth to ensure your survival and prompt evacuation***)**, plus provide**
	+ Home receiving Hospital address details
	+ Home “admitting doctors” name and phone number (eg family GP) – medevac wont commence without this.

**Contact Person’s Check List; (ie the “Coordinator or Guardian Angel” – family or good friend)**

* On learning of the emergency, via the patient’s partner or Embassy, phone the 3rd world country hospital and;
	+ Establish name and phone number of traveller’s treating Doctor.
	+ Establish medical condition.
	+ Ensure the best medical care is being given in the circumstances, (not the public system in a 3rd world country).
	+ Establish if air ambulance evacuation (medevac) is desirable – for a serious illness requiring Hospitalisation, one day in a 3rd world Hospital is one day too long (limited hygiene, specialists & equipment).
	+ Ensure the Hospital has the patient’s Insurance certificate details (or if cash, they require payment in advance).
	+ Ensure the Hospital has contacted the travellers Embassy (might assist with Immigration if there is passport issues)
* Advise the Insurance Company of the Emergency & seek their urgent cooperation for medevac.
* If not insured, email medevac providers (eg Careflight for SW Pacific to N. Z. or Aust.) & request quote and forms. For a quote you should only need the two Hospital address details, insurance details & patient name.
* If not insured, select a medevac provider and confirm they will do the medevac mission as quoted.
* Phone the travellers GP, advise of the situation, arrange for an Admitting Doctor and ask that doctor to phone the insurance company & medevac provider to confirm receiving conditions are met (an essential prerequisite)
* Assist the Insurer with information or complete the forms provided by the medevac provider using;
	+ The details provided earlier by the traveller (ie the “in case of Medical Emergency document”.
	+ The latest medical condition and vital signs as obtained from the hospital. (ensure it is appropriate for medevac)
	+ Request accompanying partner if appropriate (normally at no extra cost).
	+ Confirm weight estimate of accompanying baggage (normally limited to 7Kg, negotiable).
	+ Email the completed forms back to the medevac provider if not insured.
* Phone the medevac provider, confirm insurance is approved [or pay the cost (eg $100,000 plus)] & ensure nothing else needs to be done and request a copy of the flight schedule asap (this confirms medevac is happening)
* Ensure the accompanying passenger has transport if the ambulances do not have room (most likely)
* Keep other family members informed & involved in the decision making process.
* Inter-Island helicopter medevac to Island major Hospitals is available in Fiji, Tonga & Vanuatu., eg Pacific Island Air, Medevac Pacific Services, Helipro etc. The patient can then be prepared for medevac to NZ or Aus.

 *Prepared by John & Wendy Taylor, Midnight Sun*