ticed at Imam Hossain Hospital. In the maneuvers, clinical cases first are delivered to the nursing sector for triage, and the triaged cases are diagnosed; remedial actions were described to the professors in different specialties. Problems were directed toward the administration for decision-making. The results of the exercises from the nursing, clinical, and administrative personnel were analyzed.

In addition to assessing the results, the basic design, the scenario and triage protocol, several medical protocols and methods to improve the executive process are being discussed.

The lack of medical protocols and proper training of hospital personnel were basic reasons for the errors in triage, diagnosis, treatment, and operations.

**Keywords:** disaster health management; exercise; hospital personnel; Iran; maneuver; training; triage

**B20 Rescue Missions and Operation of Chinese International Search-and-Rescue Teams following Several Foreign Earthquakes**

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**Objectives:** To summarize the medical practice organized by the Chinese International Search-and-Rescue teams (CISAR) during seven deployments of overseas earthquake rescue missions and discuss rescue modes during a disaster.

**Methods:** Previous medical rescue missions and their characteristics were analyzed by reviewing job records.

**Results:** Medical rescue missions were classified into three stages according to the features of earthquakes. The priorities of primary medical work were performing a 24-hour search of the affected area, group-by-group, to rescue survivors and provide first aid to the injured using mobile hospitals. The priorities of interim medical work consisted of a medical tour, hygienic disease prevention, combined transfer of severely injured victims from remote areas, and continuing the preparation of mobile hospitals in camps. The priorities of medical work in the later stage of the response were facilitating the recovery of local medical institutions, residing in medical agencies, organizing the Chinese nursing sector, donating medicine and devices, and coordinating reception and normal treatment.

**Conclusions:** Foreign search-and-rescue teams can be deployed to the full extent in limited time to serve the needs of victims of disaster.

**Keywords:** Chinese International Search-and-Rescue; disaster health management; earthquake; medical care; rescue

**Oral Presentations—Research**

**Literature Review of Disaster Health Research in Japan**

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**Introduction:** Due to its geographical location in the Pacific Ring of Fire, Japan has a long history of disasters. The frequency of earthquakes in recent years has significantly influenced disaster health research in Japan. This paper presents a systematized review of disaster health research performed in Japan, and discusses trends in disaster health research, particularly in nursing, during the last eight years.

**Methods:** The most commonly used database in Japan, Ichushi version 4, was used. The keywords and sub-keywords: disaster, disaster nursing, practice, education, research, ability, education, response, emergency, licensure, capability, function, prevention, planning, were chosen. Combinations of these keywords were used to identify relevant literature.

**Results:** A total of 232 articles were reviewed. The number of research papers has increased gradually since 2001, and peaked in 2007. The most common search category was “disaster nursing and research”. The second most common was “disaster nursing; education”. These categories also had a high number of publications.

**Conclusions:** The recent earthquakes in Japan has accelerated researchers to implement disaster nursing concepts into practice and nursing curriculum. However, the context of disaster nursing tends to be limited during natural disasters, and few studies have discussed research methodology in disaster nursing.

**Keywords:** disaster nursing; Japanese; literature review; methodology; research

**Multiple Injury Profiles—Applications for War Injuries**

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**Introduction:** Casualties of war often sustain simultaneous injuries to multiple body regions. Standard methods to estimate the increased threat to life from multiple injuries have been in use for years, yet uniform methods for presenting the details of such injuries only recently have been applied. The use of these methods is crucial for estimating the true characteristics and burden of injury. This presentation will introduce the multiple injury profile (MIP) methodology and demonstrate its useful application for war injury epidemiology.

**Methods:** Abbreviated Injury Scale scores indicate which body region was injured. Multiple injury profiles are defined by a vector in which the first letter indicates the presence of an injury in that region and a hyphen for no injury in that region. The profile becomes a categorical population characteristic that can be studied and analyzed. Data from the second Lebanon war was used to demonstrate the benefits of the application of this approach.

**Results:** The use of multiple injury profiles enabled the production of a more comprehensive picture of injuries by recording injuries that previously were unregistered (being "secondary" or concealed as part of "multiple"). Multiple injury profiles demonstrate that certain combinations of injuries are more deadly. These findings suggest that the