How Can the Clinical Laboratory Prepare Against Environmental Contamination and Bioterrorism? Ildikó Endreffy, PhD, L. Szőc, MD, I. Kopcso, MD; P. Molnár
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The bioterrorist events took place in the United States, but they had a worldwide impact. In Europe, security agencies are calling for concerted global action to strengthen the public health response to the threat of international biological, chemical, and radio-nuclear terrorism. Cooperation within the European Union (EU) proved essential and inevitable. In a border-free space in which produce, products, services, and people can circulate, it is essential that appropriate mechanisms and arrangements are put in place to ensure prompt notification and exchange of information in case of threats and attacks; action at the source to stem the spread of disease and environmental contamination; mutual assistance for diagnosis and management of cases; and laboratory and epidemiological investigations.

Aims and tasks include: (1) develop capacities; (2) educate and train laboratory technicians; (3) train lab techs to use polymerase chain reaction (PCR), chromatograms, etc.; (4) train lab techs in forensic microbiology; and (5) improve analytic techniques for toxins, etc.

Keywords: bioterrorism; clinical training; contamination; diagnosis; environment; European Union; information; laboratories; management; notification; techniques

Mass Poisoning with Carbon Monoxide
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Professionals who respond to large-scale emergency situations often find themselves under a considerable amount of stress. The authors present a case report on mass poisoning with carbon monoxide in view of the EMD response and on-the-spot problem solving due to the (non-) existing disaster plan within the University Medical Centre in Ljubljana, Slovenia.

Keywords: carbon monoxide; crisis; disaster; emergencies; large-scale; plan; poisoning; professionals; response

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Due to different historical developments, there are various types of prehospital Emergency Medical Services (EMS) across Europe. While some EMS systems are based on the provision of prehospital emergency care by paramedics and emergency medical technicians, others are organized around the central role of emergency physicians. There are systems that provide as much care as possible at the scene of emergency, whereas other systems aim at minimizing the on-scene and transport time. When it comes to comparing and benchmarking EMS systems in Europe, these differences become obvious and need to be carefully taken into account. Differences in outcomes cannot be explained only by medical performance, but also by system design. The analysis of resource utilization also cannot be assessed without considering the whole system.

A benchmarking study started in 1994 compared the clinical and economic performance of three European EMS systems (Birmingham, UK; Santander, Spain; and Bonn, Germany)—the first European Emergency Data (EED) project. The study design was developed against the background of the different systems, using standardized scores and measurements such as the ICD coding system, the Glasgow Coma Scale (GCS), the Mainz Emergency Evaluation Score (MEES), and other outcome scores.

Basically, the study revealed the best medical performance of the three EMS systems in Bonn, whereas the system in Birmingham was characterized by the best economic performance and optimized allocation of resources.

The results of the above study form the scientific basis for the ongoing European Emergency Data (EED) project, which is funded by the European Commission (grant agreement no.: SPC.2002299). The study comprises 12 European EMS systems and one associated partner system from the U.S. The main objective of the project is to define a common set of European EMS indicators for health monitoring, including indicators of health status of emergency patients on the one hand, and on resources, performance, and utilization of the EMS system on the other.

This presentation provides an overview of the development of the EED project, starting with a summary of the first EED project on benchmarking and concluding with a status quo of the current project. Preliminary results of this ongoing project contain a set of indicators for health monitoring based on EMS data that are available in each of the project partner's EMS systems.

Keywords: benchmarks; benefits; comparisons; data; effectiveness; efficacy; Emergency Medical Services (EMS); European Emergency Data system (EED); monitoring

International Activity of the Council on Cooperation in the Field of Public Health of NIS Countries for Emergencies and Acts of Terrorism Prevention and Relief
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The Council on Cooperation in the field of public health of NIS countries is a profile working body of the NIS Executive Committee. During its regular sessions (twice each year), the Council considers the most urgent topics in