

Primary Trauma Care (PTC) courses,

Papua New Guinea 2005

February	Mt Hagen	Simon Jensen FACEM, Moses Lester M.MedEM trainee, Sonny Kibob M.MedEM t.
March	Madang	Chris Curry FACEM, Vincent Atua M.MedEM t, Gertrude Didei (anaeasthtist)
May	Goroka	David Symmons FACEM, Moses Lester M.MedEM t, Sonny Kibob M.MedEM t, Nick Dala M.MedEM t
May	Lae	David Symmons FACEM, Yongoe Kambue M.MedEM t
June	Mt Hagen	Jack Hodge FACEM, Moses Lester M.MedEM t, Sonny Kibob M.MedEM t
June	Rabaul	Ric Todhunter FACEM, Julius Plinduo M.MedEM t
July	Madang	Naren Gunja FACEM, Vincent Atua M.MedEM t, Gertrude Didei anaesthetist
July	Kimbe	Yongoe Kambue M.MedEM t
August	PMGH	Sandy Inglis FACEM, Sandra Rennie ACEM registrar, Sam Yockopua M.MedEM t, Alfred Raka M.MedEM t, Desmond Aisi M.MedEM t, Wala Marjen M.MedEM t
September	Goroka	Sandra Rennie ACEM reg, Yongoe Kambue M.MedEM t, Sam Yockopua M.MedEM t, Vincent Atua M.MedEM t, Moses Lester M.MedEM t, Sonny Kibob MmedEM t
November	Lae	Antony Chenhall FACEM, Yongoe Kambue M.MedEM t
November	Rabaul	Antony Chenhall FACEM, Julius Plinduo M.MedEM t

Reports

March Madang Chris Curry FACEM, Vincent Atua M.MedEM, Gertrude Didei (anaeasthetist)

Participants

Steven Toraso,	Reg ED	Fri
Monica Clement	MO, ED	Fri Sat
Valentina Kupi	Charge Nurse, ED	Fri
Josephine Mai	ED nurse in surgery	Fri
Sai Yapoa	ED nurse	Fri
Monica Tauna	ICU nurse	Fri Sat
Helen Krasimbi	ICU nurse	Fri Sat
Terrence Kuaru	HEO ED	Fri Sat
Catherine Anis	HEO ED	Fri Sat
Walter Ban	HEO ED	Fri Sat
Jacob Gubi	HEO surgery	Fri Sat
Susan Aladu	HEO paediatrics	Fri
Ishrael Lebani	resident HEO ED	Fri Sat
Rebecca Gabong	resident HEO ED	Fri
Yagos Piniau	resident HEO surgery	Fri

Jumias Tamur	resident HEO Obs&Gyne	Fri Sat
Olivier Kola	resident HEO	Sat

Topics

Friday 08.00-15.00

Introduction	CC
The local Perspective	VA
ABCDE of trauma	CC
Demonstration	
Airway management	GD
Ventilation management	CC
Chest trauma	
Case scenarios	
Circulation and Shock	CC
Abdominal trauma	VA

Saturday 08.00-12.00

Common poisonings	CC
Head injury	CC
Spinal injuries	VA
Burns	CC
Near drowning	CC

**May Goroka David Symmons FACEM, Moses Lester M.MedEM,
Sonny Kibob M.MedEM, Nick Dala M.MedEM**

Participants:

1	Sr E Kamona	AOPD, Goroka
2	Mr B Onafi	ED, Goroka
3	Mr P Keasu	Labor Ward, Goroka
4	Sr W Tobua	Wd 1 Goroka
5	Sr R Siwa	Wd 1, Goroka
6	Sr B Lingas	Wd 1, Goroka
7	Sr B Waiaville	Wd 2, Goroka
8	Mr D Sungu	Theatre, Goroka
9	Mr A Tipiso	Theatre, Goroka
10	Sr S Tunama	Wd 3, Goroka
11	Sr K Mikave	Wd 4, Goroka
12	Sr L Pondek	ISC, Goroka
13	Sr K Rogers	Wd 3, Goroka
14	Sr Jacinta Edson	Asaro Health Centre
15	Mr Formai Meneme	Henganofi Health Centre
16	Sr Rose Bare	Kassam Health Centre
17	Sr Christine Waure	Kainantu Hospital
18	Mr Jimmy Ebena	Komperi Health Centre
19	Sr Turi	HRCN
20	Dr J Mondo	Anaesthesia RMO. Goroka
21	Mr E Makao	HEO, ED, Goroka
22	Dr K Sanga	ED, Goroka
23	Dr Charlie Koi	RMO, Goroka

24	Dr Emmanuel Mondurafa	RMO, Goroka
25	Dr T Lei	Anaesthesia, Goroka
26	Dr Marsalina Heritrenggi	RMO, Goroka

Dr Nick Dala with the help of hospital administration, arranged for Dr Kibob and Dr Lester to travel down from Hagen to assist. Accommodation was arranged for participants from out-stations and food was provided during the course.

The course was held in the School of Nursing main classroom and a computer projector was provided by Goroka Institute of Medical Research.

The course followed the syllabus and slides provided from the PTC course disc.

The course content was evenly shared by the four instructors. Dr Lester and Dr Kibob in particular were excellent as instructors; both obviously had a very good grasp of the subject matter and considerable experience, so were able to relate the basic objectives to the course participants very well.

The first day was mainly concerned with primary survey, including practical stations for initial assessment, with case scenarios. The second day then covered specific areas such as chest/abdomen/head and specific patients, children and pregnancy and include a practical session on trauma radiology.

The final day included a course summary and a multiple choice test. Unfortunately the multiple choice test included many question of the type “the following are true except” or “which is false”. These questions are generally poorly answered by candidates who use English as a second language, even if they understand the concept being tested.

The participants enjoyed the course and by their contributions during the sessions seemed to have grasped the basic contents. Dr Dala will be marking the test and sending the results to Dr Symmons in Port Moresby, so that certificates can be made.

In summary the PTC course was well attended and well organized. It is hoped that the participants will be able to use the knowledge that they have acquired to assist them in the initial assessment and treatment of trauma patients at there place of work.

May Lae David Symmons FACEM, Yongoe Kambue M.MedEM

Participants:

1	Sr W Sebyy	NO, ED, ANGAU
2	Sr J Dopsie	NO, ED, Vanimo
3	Mr J Zagi	CHW, Wit Health Centre
4	Mr S Yogima	NO, Milfordhaven Clinic
5	Mr Ringo Bariana	HEO, Morobe Patrol Post
6	Dr Anthony Nabai	RMO, ANGAU
7	Dr Geita Moria	RMO, ANGAU
8	Dr Charles Magoekia	RMO, ANGAU
9	Sr Judith Timi	NO, Milfordhaven Clinic
10	Sr Agnes Aupei	NO, Taraka Urban Clinic
11	Sr May Bartsaka	NO, Malahang Clinic
12	Cathy Zelengu	CHW, Malahang Clinic
13	Sr Imelda Hinei	NO, Uni-Tech Clinic
14	Betty Fugre	CHW, Uni-Tech Clinic
15	Mr John Dem	CHW, Haikost Clinic
16	Dr Mary Anne Kanjua	MO, Haikost Clinic

17	Cecilia Warewaing	CHW, Buino Clinic
18	Mr Bonso Karap	NO, Buino Clinic
19	Mr Robert Bakinam	CHW, Tent City Clinic
20	Sr Agnes Aitoba	NO, Tent City Clinic
21	Sr Kathy Paliam	NO, Butibam Clinic
22	Sr Linnah Noah	NO, Butibam Clinic
23	Dr Pramod Das	MO, Uni-Tech Clinic

The course was organized by Dr Yongoe Kambui with the assistance of the District Health Office. Study leave was given to staff from the urban clinics in the Lae area to allow nursing officers and CHW's to attend the course. In addition a number of RMO's fro ANGAU were able to attend.

The course was run over three days. Unfortunately there were no computer projection facilities, so the course was given as white board presentations and practical sessions. Morning tea and biscuits were provided, but not lunch. All candidates were provided with a photocopy of the PTC course manual at the time of attendance.

Almost all of the teaching sessions were given by David Symmons, with Yongoe Kambui providing some case scenarios and a couple of lessons. Most of the first day was spent covering initial assessment and resuscitation, including practical sessions. Day two followed the PTC syllabus, with sessions on chest/abdo/ head trauma/trauma in children/trauma in pregnancy. On day three additional topics not generally included such as snake bite and asthma were covered. Chicken legs were provided so that a very valuable practical session was held in which the participants practiced inter-osseous injection with 18g needles and 2 ml syringes.

Once again a multiple choice test was held. Again, candidates who obviously knew the basic content scored poorly in the test due to language difficulties.

It would be helpful to develop a new multiple choice exam in which all of the questions are of a similar type:

Which of the following is the best correct answer-

With stem and five possibilities, ABCDE, only one of which is correct.

This would avoid difficulties based on language and would better test understanding of course content.

The level of enthusiasm and direct participation of the candidates at this course was particularly impressive. The lack of audio-visual facilities did not impact on the presentation of the course materials at all. In many ways, it is easier to teach in this setting with simple facilities.

At the conclusion of the course the candidates were presented with a certificate kindly produced by ANGAU medical administration.

It was good to see opportunity for staff from urban clinics to be taught initial assessment and basic resuscitation of seriously ill patients. It is hoped that this course may have an impact on survival in their respective communities.

**July Madang Naren Gunja FACEM, Vincent Atua M.MedEM,
Gertrude Didei anaesthetist**

July 13

First day of the trauma course (PTC). Everything runs here at Papuan standard time...ie. an hour after the stated start time. People take their own time to get places and get things done;

it's just something you have to get used to. We got an excellent data projector from the Church on loan. The CEO paid for the 3-day hire and Vincent picked it up. The morning consisted of going through the entire basis of trauma management as these people had not done any formal training before in this area. Present were Vincent (as an observer) and 8 participants:

Bob Simon	HEO/Tutor
Terence Kuaru	HEO/Tutor
Francis Gurunan	RN ED
Yakos Tuh	RN ED
Yagos Piniau	HEO
Rose Selve (Billy's sister)	EN ICU
Judith Angasa	RN ICU
Nezzary Gienu	RN ED

They'd all seen trauma and probably managed it as well, but had little clue about any method for doing it. We decided that lectures/theory were best in the morning and prac in the arvo which everyone was getting post-prandial drowsiness. Morning tea had been organised and paid for by Dr. Usurup. We ran through:

- why we need PTC
- setting up a trauma team and the way they work
- primary survey/DRABC
- secondary survey
- radiology for trauma
- supportive care
- disposition of trauma patients
- head injury
- spinal injury
- applying C-collars
- log rolling
- needle decompression

It had to be at their basic level. After lunch (at Madang Lodge) the arvo was a practical session going through what we had lectured in the morning. We stood around Resusci-Anne (which I discovered was a CPR manikin that couldn't be intubated) and went through trauma scenarios. I think they all learnt a lot and felt it was worthwhile. Even Vincent learnt a thing or two. Gertrude Didei (Anaesthetist) was present for the prac and seemed to be appreciative of the training. The prac was about 2hr of going through a scenario – 24M falls 5m off a tree: HI, tension PTx, femoral # and leg laceration. What I think these HEOs & nurses needs to be able to do is work as a team, be aware about how to properly manage a trauma and continually practice these principles. I have advised Vincent that he must go through all this every week with them. They want to buy an intubatable Resusci-Anne and need a quote from Oz.

July 14

The second day of the PTC course was more on time (only ½ hour late). The day went something like this:

- review of trauma management (1 & 2 surveys)
- chest trauma
- abdo trauma
- pelvic trauma

- limb trauma
- trauma in pregnancy
- paediatric trauma
- burns

Participants were:

Bob Simon	HEO/Tutor
Terence Kuaru	HEO/Tutor
Francis Gurunan	RN ED
Yakos Tuh	RN ED
Yagos Piniau	HEO
Rose Selve	EN ICU
Judith Angasa	RN ICU
Mary Payor	RN ED
Annette Kalago	RN ED

The afternoon practice session was quite productive and going over course material was important for the PTC participants. I ran three scenarios:

- 12yo boy gets run over by a car: HI, clavicular #, pelvic #, abdo laceration
- 30yo pregnant woman assaulted by her husband: abdo pain, lung injury
- 54yo woman self-immolates: 40% burns, C-spine injury

They seemed to enjoy the session and felt that they needed to practice what they'd learnt. Vincent will run similar sessions with all of them on a regular basis.

July 15

There was an excellent turnout for the chloroquine poisoning talk 8-9am and most people stayed back for the Snakebite session 9-10.30am. I presented a case of chloroquine OD in a 24F who fainted and was unconscious, then went through toxicodynamics/kinetics, and management of the OD. Snakebite was again a PP presentation going through the main culprits in PNG (dispelling a few myths), epidemiology, first aid, SVDK and management. They do have a couple of kits here but they don't know how to use it. They found it difficult to accept that you can't identify a snake species by just looking at it or having it described by a lay person. After a break, I did an hour on asthma: assessing severity and management – this apparently was their No1 topic request. They don't have IV salbutamol and use aminophylline or boluses of s/c adrenalin in severe asthma. There are no peak flow meters or spirometers here.

**September Goroka Sandra Rennie ACEM registrar,
Yongoe Kambue M.MedEM,
Sam Yockopua M.MedEM, Vincent Atua M.MedEM,
Moses Lester M.MedEM, Sonny Kibob MMedEM**

Primary Trauma Care and Resuscitation Short Course

08.30	Introduction	Yongoe Kambue
	Primary Survey and Resuscitation	
09.30	Airway	Sam Yockopua
10.00	BREAK	
10.30	Breathing	Moses Lester

11.00	Circulation	Alfred Raka
11.30	Secondary Survey	Vincent Atau
12.00	BREAK	
1.00	Head injury	Sonny Kibob
1.30	Chest injury	Wala Marjen
2.00	Abdominal injury	Desmond Aisi
2.30	BREAK	
3.00	Limb injury	Julius Plinduo
3.30	Spinal injury	Sandra Rennie
4.00	Questions and Discussion	