

ATLASS II
Primary Trauma Care (PTC) Course Report
Family Medicine Programme, HNGV
1 - 2 July 2014

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Introduction

The course was the first of a series that will be held during the new Family Medicine Programme (FMP) training which started on 30 June 2014. Two further courses will be held during year 1 of FMP. The purpose of the PTC is to familiarise the FMP trainees with basic trauma care especially directed at doctors working at the CHC level.

The course was run at Hospital Nacional Guido Valadares (HNGV) in Timor Leste on 1 - 2 July 2014. There were 15 participants, all FMP trainees; 7 on their surgical rotation and 8 on their maternal health rotation.

The standard 2 day PTC course plan was followed with the following variations; burns, paediatrics and obstetrics were deleted as these topics will be dealt with during the specific rotations. Instead more emphasis was given to transportation and referral of trauma patients because the FMP candidates will work away from hospitals and will be required to transfer all seriously injured patients to a referral hospital.

Course participants

Arcanjo Nunes
Fernando Camnahas
Mericio de Costelho
Edinha Ximenes
Mouzinho Belo
Humberto Johanes
Abilio Pinto
Jonatas Madeira
Jose de Araujo
Odecia Ato
Egio de Jesus
Geranina Fernandez
Estevao MARiz
Valdemar da Cruz
Jeronimo Baptista

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Feedback from participants

At the end of the second day the participants were asked to fill out an evaluation form and score 1 - 5 whereby 5 is the highest and 1 the lowest score. Below the score are shown. There is unanimous satisfaction with the course; “ABCDE of trauma”, “Abdominal, Head and Chest trauma” and “Transportation” scored highest. “Scenario practice” showed lowest. Interesting is that “scenarios” only scored 4.6 whereas in the free comments this was singled out as particularly good.

Topic																Mean	
Local trauma perspective	5	4	5	5	5	5	5	5	5	4	5	5	5	4	4	5	4.7
The ABCDE of trauma and Primary Survey	5	5	5	5	5	5	5	5	4	5	5	5	5	4	5	4.9	
Airway and breathing	5	5	4	5	5	5	5	5	4	5	5	5	4	4	5	4.7	
Demonstration scenario by instructors	5	5	4	5	4	5	4	5	4	5	4	5	5	5	5	4.7	
Scenarios practice	4	4	4	5	4	5	5	5	4	5	4	5	5	4	5	4.5	
Circulation and shock		5	5	5	5	4	4	5	4	5	5	5	5	4	5	4.7	
Secondary survey	4	5	5	5	5	4	5	5	4	5	5	5	5	4	5	4.7	
Skill stations	4	3	5	5	5	5	4	5	4	5	5	5	5	4	5	4.6	
Abdominal trauma	5	4	5	5	5	5	5	5	5	5	5	5	5	4	5	4.9	
Head and Chest trauma	5	4	5	5	5	5	5	5	5	5	5	5	5	4	5	4.9	
Limb and Spinal trauma	5	3	4	5	5	4	5	5	5	5	5	5	4	4	5	4.6	
Workshop: Transportation	5	4	5	5	5	5	5	5	5	5	5	5	5	4	5	4.9	
Scenarios	5	4	5	5	4	5	4	5	5	4	4	5	5	4	5	4.6	

In addition to the scores the candidates were asked the following two questions. Below is a summary of the main responses.

What was the best part of the course?

- Scenarios
- ABCDE of trauma
- Be able to deal better with trauma

What would you change?

- Requests for repeated/further training
- Course to be longer

Lessons learned

We learned a few lessons which will direct us for the next two PTC courses of the FMP programme.

- For logistical reasons we had moved the skill station to the afternoon of Day 1 and the first scenarios to the morning. This worked well and we will keep it this way for the next course.
- The morning break should be earlier on Day 1 to allow time between the “ABCDE of trauma” and “Airway and Breathing” because there is overlap between the two presentations. Although repetition is a good thing, it was found that the time between the two was too short.
- Head trauma and chest trauma need to be separate presentations each of 30 minutes.
- The most useful skills station is the chest drain one with the goat. However, within the timeframe it was not possible to give all participants time to practice. We now plan for next time to have two goat stations which will double the time available to each participant with the chest drain model so that every participant has a chance to insert a chest drain.

Acknowledgments

Sarmiento Faus Correia and Karen Myers of the RACS office in Dili are thanked for their logistical support in buying the goat, printing the manuals, ensuring catering etc. Without their help the course would not have been held.

The PG training centre of HNGV is an excellent location for the course.

I thank all the instructors who were able to participate in spite of other commitments as directors and heads of departments. I am especially grateful and proud of our Timorese colleagues who delivered the majority of the presentations and the feedback shows that they did this well.