

PRIMARY SURVEY

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PREHOSPITAL AND RETRIEVAL MEDICINE

An article was submitted to the Prehospital care section of the journal some months ago entitled "For debate: A licence to practice prehospital and retrieval medicine". In this the authors, MacKenzie and Bevan, propose a subspecialty of prehospital and retrieval medicine. It was felt that this article was of such importance that as well as publishing the article the views of other interested parties should be sought.

As a result in the Prehospital care section of this journal you will find the article itself, an editorial, and the views of a variety of organisations on this proposal. The Editors hope this will not be end of the matter and that the reviews of the readership will also be expressed.

Please direct any views you have on the subject to – <http://www.emjonline.com>

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MANAGEMENT OF UNCOMPLICATED FIRST GENERALISED SEIZURE

Seizures are frequent reasons for attendance at Emergency Department and 0.24% to 0.3% of adults who present to an Emergency Department do so because of a first seizure.

In this paper the authors have undertaken a literary view of all aspects of management of adult patients. This review highlights the importance of thorough history taking and examination, routine bio-chemistry and haematology, an electro cardiogram, and selected neuro imaging.

They also highlight the importance of discharge planning with driving and life style advice and follow-up in a specialist clinic.

An algorithm has been produced for the management of adults with an uncomplicated first generalised seizure and a possible recording chart is also included.

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LEGIONNAIRES OUTBREAK: DID THE MAJOR INCIDENT PLAN HELP?

Most hospital major incident plans are designed to deal with a large influx of acute trauma or acute medical problems but would any of these plans deal with the admission of 498 suspected cases of Legionnaires Disease in 10 days?

The authors of this paper look at just this situation and how it was dealt with by Furness General Hospital. The authors undertook qualitative analysis of staff involved in the management of the incident and draw conclusions as to how the incident was dealt with in the light of an existing major incident plan. The authors suggest that a major incident plan is useful for planning and testing responses, but different documentation may be required at the time of the incident.

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FOREIGN BODIES IN EAR: A SIMPLE TECHNIQUE FOR REMOVAL ANALYSED IN VITRO

In this paper we find described a simple disposable sterile kit for syringing ears. The paper, however, also looks at the pressures produced by different ear syringing techniques and the likelihood of damage with these techniques. A list of contraindications to ear syringing is also provided. This method appears safe, uses easily obtainable equipment and compares well with other techniques.

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FAST ON OPERATIONAL MILITARY DEPLOYMENT

Focused Assessment Sonography for Trauma (FAST) in the Emergency Department is well documented. This paper looks at its use in a small number of patients with abdominal injury in the military setting. The size, weight, and simplicity of use make this type of equipment ideal for the military setting. It is manoeuvrable during resuscitation. Can it save an exploratory laparotomy? Can it be used as a triage tool? The results of this small study look promising.

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EMERGENCY DEPARTMENT ATTENDANCES FOLLOWING AUTOMOBILE ACCIDENTS IN ITALY

In this study the attendances of 424 drivers who had been involved in road traffic accidents were looked at to decide whether or not their attendance at an Emergency Department was appropriate and to see if the demography and crash characteristics of these patients and their accidents gave any clues as to why they had attended an Emergency Department rather than seeking health care elsewhere. A total of 27.4% of the drivers were felt to have non-urgent problems, which could have been dealt with by other health professionals. A number of the characteristics of those attending inappropriately were identified. The study concludes that health promotion and education programmes are required to avoid these inappropriate attendances.

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ABC OF COMMUNITY MENTAL HEALTH

Mental health problems are extremely common presentations in Primary Care and the National Service framework for Mental Health states that there should be consistent access and delivery of primary care services including out of hours and non-scheduled care at times of complex need and mental health crisis.

In this article the authors, Doy *et al*, look at the issues of consent and depression in the management of mental health problems in emergency settings.

There is a lot of structured information within this article which would be useful to those involved in dealing with this type of problem and I am sure many practitioners will find this article exceedingly useful.

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