Three Years of EMSB in Indonesia: A Journey in Standardizing and Escalating Burn Care in Indonesia

(AUSTRALIA - NEW ZEALAND - INDONESIA)

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Indonesian College of Surgeons

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Managing severe burn cases is still a problem in many countries, including our country with a population of 270 million people.

Training of staff is critical

To achieve better outcome in managing burn injuries

It’s been 6 YEARS Since our 1st course in Indonesia

( DECEMBER 2013 )
To insert EMSB course in National Curriculum for General Surgery and Plastic Surgery Training in Indonesia

To provide EMSB course as a Continuing Professional Development Program for practicing general surgeons in Indonesia

To provide 690 health work forces in 2020 who are able to perform EMSB standards
HOW ARE WE DOING ???
Origin of Participants Institution

These are only the institutions, the **true origin** of participants are almost from all parts of Indonesia.
1st EMSB Course (BALI) 2013

1st Independent Course 2017

EMSB Course

INvolving 2 Colleges: ICS & Indonesian College of Plastic Surgeons

Courses are held independently in various regions of Indonesia (Bandung, Jayapura, Jogjakarta, dll)

2016

Full BAHASA

2018-now
2016 – August 2019:

- 47 provider courses (1102 participants)
- 27 active instructors
- 9 coordinators

2016 – now:

- 2 COURSES
  (2 provider courses, 1 TtT)

2017:

- 1 COURSE
  (2 provider courses, 1 TtT)

2018:

- 3 COURSES
  (11 provider courses)

2019:

- 5 COURSES
  (15 provider courses, 1 TtT)

2016 – August 2019:

- 5 COURSES
  (16 provider courses)
To provide 690 health work forces in 2020 who are able to perform EMSB standards

(untill now)

1102 doctors and nurses
so we did a little *SURVEY*
ULTIMATE GOAL

To provide health work forces competent in early burn resuscitation in all hospitals all across Indonesia
70 responders of 511 questionnaires distributed randomly to our EMSB participants
DISTANCE BETWEEN PARTICIPANT'S HOSPITAL TO THE NEAREST BURN CENTER

- <1 hour: 73%
- 1-8 hours: 21%
- >1 day: 6%

FREQUENCIES IN TREATING SEVERE BURN INJURY AFTER ATTENDING EMSB COURSE

- >10 cases in 6 months: 57%
- 5-9 cases in 6 months: 19%
- < 5 cases in 6 months: 19%
- Never: 1%
ANY EXPERIENCE OF TREATING SEVERE BURN PATIENTS AFTER EMSB?

Yes 81.9%
No 18.1%

In treating severe burn cases

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>No cases yet</th>
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<tbody>
<tr>
<td>Able to identify and manage inhalation trauma</td>
<td>57 (100%)</td>
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<tr>
<td>Able to resuscitate</td>
<td>57 (100%)</td>
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<td>Able to identify the indications and perform escharotomy</td>
<td>43 (75.4%)</td>
<td>2 (3.5%)</td>
<td>12 (21.1%)</td>
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<td>Able to refer in SPAM and ISBAR format</td>
<td>45 (78.9%)</td>
<td>12 (21.1%)</td>
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Changes and improvement in treating severe burn cases after EM SB

- 0 (0%)
- 1 (1.7%)
- 2 (5.1%)
- 3 (30.5%)
- 4 (30.5%)
- 5 (62.7%)

No changes at all

Major changes
DIFFICULTIES IN APPLYING EMSB PRINCIPLES IN PARTICIPANT’S HOSPITAL

- No: 87%
- Other: 13%
  - Anesthesiologist Problem: 7%
  - Morphine: 3%
  - Too aggressive: 2%
  - Distance in referral: 1%
Our GOALS

To increase knowledge and skill for severe burn management in the first 48 hours

To educate educators in institutions

To increase knowledge and skill for severe burn management in the first 48 hours

To educate first-line doctors who are responsible in early management of burn patient

AS A REMINDER

To increase the quality of burn care in the first 48 hours
CONCLUSION

1. EMSB is increasingly known and practiced in Indonesia → we have achieved beyond the expected goal.

2. The path has been started to have a standardized and qualified burn care all over Indonesia.

3. Still, many challenges to face:
   - having every doctors participating in the National Burn Registry,
   - building a good Burn Referral System and
   - also educating the people about burn prevention.
THANK YOU

FOR FIGHTING TOGETHER FOR INDONESIA