



HEMS in the Tuscany 118 Emergency - Urgency Service

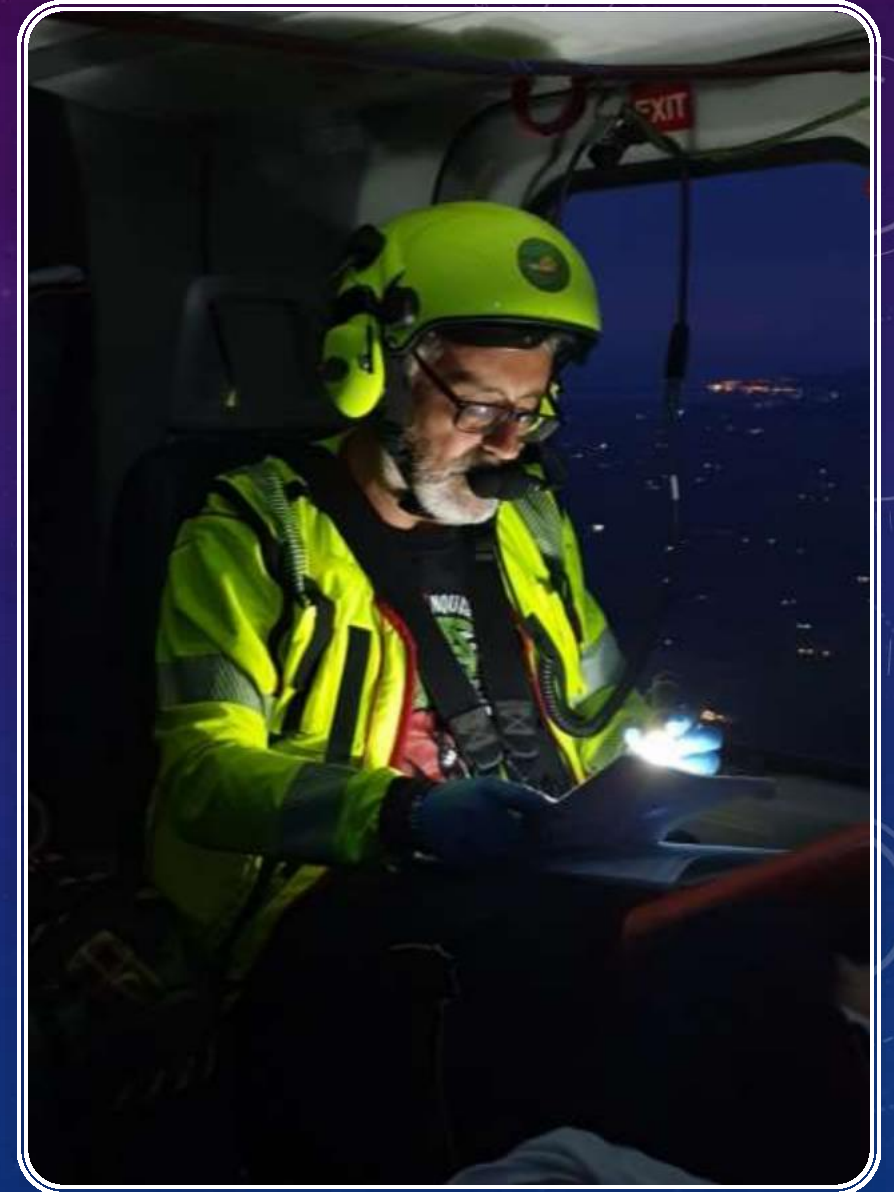


THE 6th LEONARDO EMS LEADERSHIP SYMPOSIUM

Miami, 28 June 2024

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- Head Director, Usl 118-Helicopter Emergency Service, Grosseto
- Emergency Physician, Asl Grosseto
- Vice president of the “*HEMS Association*” (Italy)
- Member of Scientific Board “*Rescue Press*”
- 2.270 flight hours flown in more than 2282 HEMS missions



PAST AND PRESENT



SINGLE EUROPEAN EMERGENCY NUMBER 112

- Emergency service model adopted in several European countries
- All emergency phone calls flow into a single Operation Center (**Call Center NUE 112**)
- The Call Center operators, after having identified the requirement, redirect the calls to the competent agency for the management of the emergency event:
 - Police (113)
 - Fire Brigade (115)
 - Health Emergency (118)



HEMS IN ITALY

- Currently, healthcare emergency services in Italy are organized on a regional, or provincial basis with relative economical, organizational and legal autonomy, and are included in the context of the 118 service – Health emergency
- Most health care emergency services are carried out by private operators through a contract by the Nation Health service
- No bills to patients
- Provide Search and Rescue
- Nurses/Doctors in 118 Centers for dispatch



- **20 regions**
- **55 bases**
- **56 helicopters**

- About 40,000 HEMS mission/year (for every base, average +720 mission/year)
- About 3,200 (7-8%) night activity

HEMS IN TUSCANY

- Started in 1999 with 3 Operative bases
- Primary and Secondary missions
- H24 Service in Grosseto (with NVG) and Massa
- Provide Service on 7 Islands of the Tuscan Archipelago



HEMS MISSION AND GOALS

Time

Environment

Patient



THE TEAM...



...THE OFFICE

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MEDICAL AND DIAGNOSTIC EQUIPMENT

- Point-Of-Care UltraSound
- CT scanner (Infrascanner)
- Cardiac massage device (Lucas)
- Incubator
- EPOC



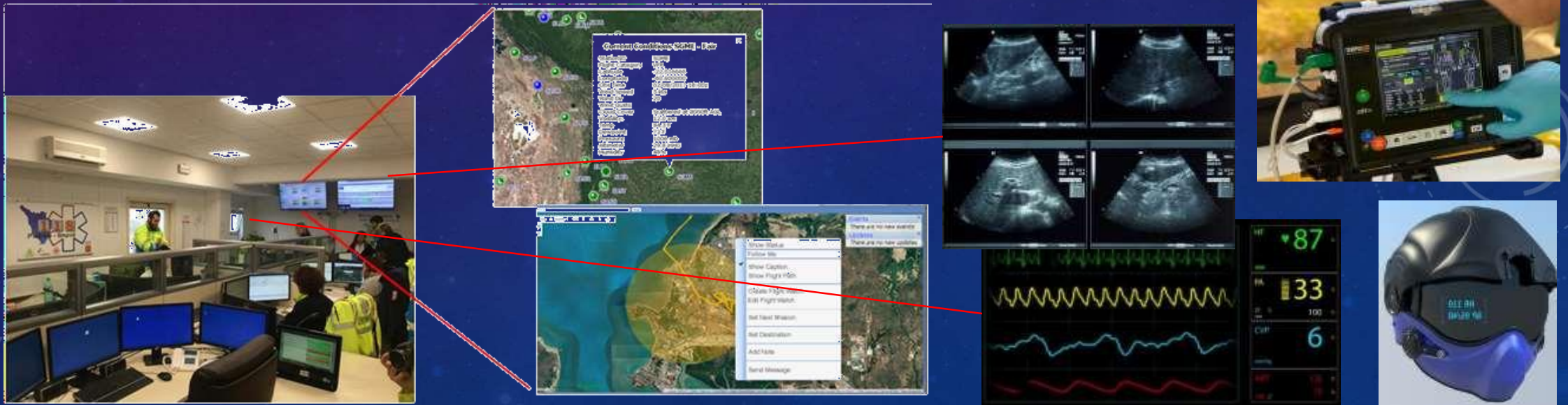
HEMS AT NIGHT

- NVG operations active in 11 out of 20 regions
- Some regions are introducing night special Hoist operations with NVG in cabin



WHAT NEEDS TO HAPPEN ON BOARD

- Communication between the prehospital care providers and the trauma teams are paramount to strengthening the trauma system, saving time and ensuring patients a better chance of survival or avoiding permanent damage. The providers must be able to communicate succinctly and completely with the trauma team, during the in flight phase and before patient turnover, so that critical elements of information are transferred in real-time to the most suitable destination hospital (for emergency room setup), which may not necessarily be the closest:
 - Continuous monitoring of patient parameters while in flight
 - More wireless cabin, subsystems and equipment to send real time patient data to base/Hospital: ECG, images, video from the cabin, report of clinical parameters, telemedicine.
 - Dedicated communication infrastructure between hospitals with connected/networked helicopters and greater bandwidth available to transmit via mobile phone or satellite technologies



LESSON LEARNT FROM PANDEMIC: ARE WE REALLY READY NOW ?

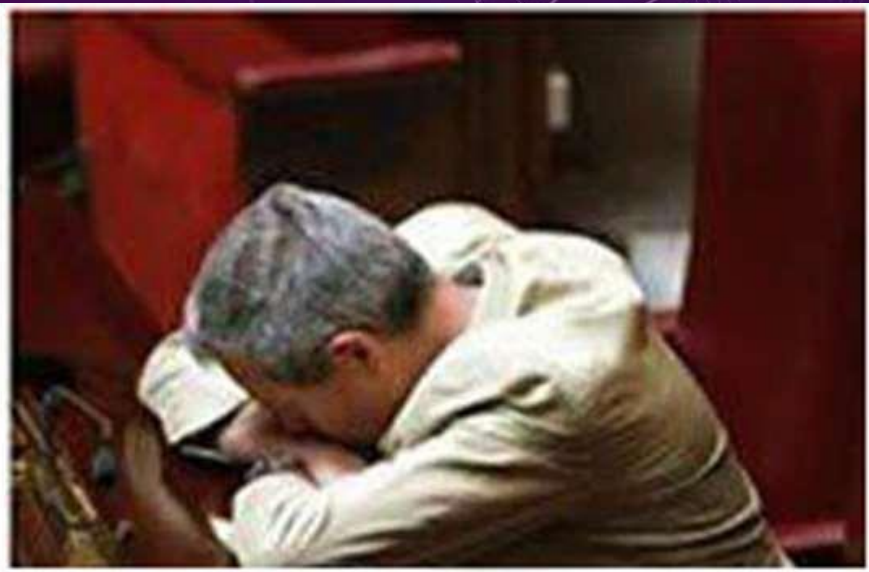


HEMS ASSOCIATION

- Formed in 2008
- Representing 46 of the 55 Italian helicopter rescue bases
- Largest association in Italy with representatives from 118 physicians and nurses, helicopter operators, regulators, helicopter OEMs and medical equipment industry
- Aims to organize and promote activities related to training and scientific updating of the operators of the helicopter rescue services through participation or organization of meetings and conferences, the production of scientific publications or educational paths, and the creation and implementation of a database concerning the medical aid interventions carried out by helicopter.



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THANK YOU FOR YOUR ATTENTION

