

Perspective on Emergency Medical Services in Bali



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Without prior notice, the doors of the three bed emergency department at Bali International Medical Centre fly open. Two seconds later a trauma patient with a severe head injury and femur fracture arrive in front of you. There is no trauma team. The BIMC staff will need to stabilize this patient and rapidly transfer them to the designated trauma care facility (Denpasar General Hospital). As a resident, I have to admit I have taken for granted the emergency medical services (EMS) system we have in the United States. This was quickly rectified by traveling to a place where EMS is all but non-existent.

In August I had the opportunity to participate in the University of California, Los Angeles (UCLA) emergency medicine resident exchange program in Bali. This program, created with the goal of improving emergency care, is a cooperation between the UCLA Center for International Medicine (and now UC Irvine) and the Bali International Medical Centre (BIMC). Every month a senior emergency medicine resident is sent to Bali to assist with medical education through giving daily lectures, providing medical consultative services to BIMC doctors and assisting local health care personnel with up-to-date EMS information.

Bali is a small island in Indonesia, about 95 miles wide with a population of approximately three million. The beaches, famous surf and amazing art have made it a huge tourist destination throughout the world. BIMC hospital arose as a much needed international standard medical facility to serve tourists, expatriates and locals. The hospital is staffed by Indonesian physicians who are trained as general practitioners to handle the common illnesses and injuries of the population. They have extremely limited access to emergency medicine training and yet are still on occasion called upon to treat extremely sick medical and trauma patients.

Although small, the hospital is well equipped with ward and ICU beds, laboratory, pharmacy, CT scan, ultrasound, operating room, ambulance and medical evacuation service. Conversely, the lack of an established and coordinated prehospital care system on the island highlights its importance. Without this, even the best hospital cannot provide the ideal care for patients.

911 Versus 112

In case of emergency in Bali, you dial 112. Most tourists probably assume this means your call will reach a central dispatch that will route emergency services to you in a timely and efficient manner. What is really means is that your call goes to the police station and someone there calls a local hospital to dispatch one of its ambulances. Hopefully one is available to find you and bring you back for medical attention. Due to the lack of EMTs, a physician and nurse are often sent out on these calls which leave the emergency department understaffed.

Base Hospitals and Prehospital Care Coordination

In Bali there are no base hospitals to provide medical direction for prehospital patient management and coordination of services over the geographic area. Once the ambulance leaves the hospital to pick up a patient there is virtually no communication between the ambulance and the hospital. Incoming ambulances cannot call ahead to advise the hospital of an incoming patient, and physicians cannot provide advice to EMS personnel. Even 2-3 minutes of notice with an age, sex, brief history and set of vitals could greatly help the emergency team to assemble and be ready to care for a patient.

Bali was a once-in-a-lifetime opportunity to test my knowledge and skills in a place where my emergency medicine training even as a resident proved very helpful to local care providers. Although our EMS system is not perfect, I gained vivid insights into the value of mature and developed prehospital services. The message I received was loud and clear. As we struggle to craft a better healthcare system, one of the roles of emergency physicians is to advocate for adequate funding and advancement of these services, which tend to run in the background but are critical to emergency care as we know it.

REFERENCES

1. Emergency Medicine Resident Exchange. UCLA Center for International Medicine; 2009. Available at: <http://cim.ucla.edu/emergency-medicine-resident-exchange.html>. Accessed October 14, 2009.