TRAINING SESSION
ON-SCENE COORDINATOR COURSE

Rabat, 19 - 21 February 2020

Medical assistance at sea as a real challenge for SAR organization

Djoro Hyacinthe Gnepa- Head, MRCC Abidjan-Côte d’Ivoire
INTRODUCTION

Maritime professions are considered as dangerous. Seafarers are exposed to injury and illness in a hostile environment such as the sea. However, doctors are only available on large passenger ships and special ships (research and offshore vessels designed for divers). On other merchant ships, medical procedures are carried out by the person responsible for medical care on board. In case of doubt about the appropriate treatment, the ship is thus obliged to request an advise onshore. Normally the RCCs are in charge of those arrangements to provide this Telemedical Adviser Service, from a Telemedical Advice Centre (TMAC). What is the current situation?
STATISTICS /MRCC ABIDJAN
<table>
<thead>
<tr>
<th>YEAR</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAR OPERATIONS</td>
<td>26</td>
<td>16</td>
</tr>
<tr>
<td>RESCUED OR ASSISTED</td>
<td>43</td>
<td>88</td>
</tr>
<tr>
<td>DIED</td>
<td>11</td>
<td>05</td>
</tr>
<tr>
<td>MISSING</td>
<td>03</td>
<td>01</td>
</tr>
</tbody>
</table>
A BIG CHALLENGE FOR MRCC ABIDJAN
Not because the number is high; but by the complexity of the tasks
- High sea / The time to reach a port may be quite long;
- Air asset;
- No TMAS
Urgent! Urgent! Urgent!

MRCC-Abidjan Request urgent medical evacuation crewmember onboard fishing vessel “AVEN”

MMSI. 322557000.

Vessel last position. 0° 19‘6” S/ 1°4‘35” W.

Number of cdt onboard. +33321877833.

Kindly coordinate and revert to ASAP. The screen shot above detail the incident.
ASSISTANCE MEDICALE EN MER
Fiche d'échange d'informations médicales entre TMAS
Circulaire MSC1
Informations médicales confidentielles.

Date : 05/01/2020
Heure : 03:31:00
De : CCM M - French TMAS :
    Téléphone : +33607275820
    Email : ccmam@toulouse.toulouse
    Boute : ALPHONSEMARTIN
Adresse :
Pavillon Louis Lévêque
Hôpital Purpan - TSA 46011
31059 TOULOUSE CEDEX 09 FRANCE

À : TMAS / SAMU :
MRCC : CROSS GRIS NEZ
Adresse extérieure :

PATIENT
Nom : [redacted]
Prénom : MARIE
Né(e) le :
Âge : 37 ans
Sexe :
Nationalité :
Fonction à bord : MATELOT

CIRCONSTANCES
- Maladie
- Accident
- Intoxication
Depuis :

Symptômes d'appel :
DOULEUR THORACIQUE SP

Antécédents
Traitements en cours
Soins à bord avant téléconsultation
PAS D'ANTÉCÉDENTS
TATEC 0

OBSERVATION CLINIQUE
Appel n°1 : 05/01/2020 03:31:00

Examen clinique et para-clinique :
Le patient a consulté il y a 15 jours pour une douleur épigastrique.
Ce matin, il s'est réveillé en pleurant avec une douleur épigastrique qui irradie dans la poitrine en retrosternal.
L'interrogatoire précis est difficile. Le patient avait peur qu'il n'avait pas à la peur de la hernie de rétention.
La douleur est différente de celle d'il y a 15 jours.
L'électrocardiogramme a été envoyé par mail. Pas de signes d'ischémie visible.
Le patient n'est pas pâle, il n'est pas en sueurs.
La douleur est évaluée à 10/10, le patient pleure.
Il aurait eu un étouffissement ce matin sans surprise de connaissances.

<table>
<thead>
<tr>
<th>Pression artérielle</th>
<th>120/70 mmHg</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poids</td>
<td>70 kg</td>
</tr>
<tr>
<td>Fréquence cardiaque</td>
<td>51 bpm</td>
</tr>
<tr>
<td>Taille</td>
<td></td>
</tr>
<tr>
<td>Fréquence respiratoire</td>
<td>16 l/min</td>
</tr>
<tr>
<td>Temperature</td>
<td>35°C</td>
</tr>
<tr>
<td>Saturation Oxygen</td>
<td></td>
</tr>
</tbody>
</table>

DIAGNOSTIC
Diagnostic évoqué:
R074 : DOULEUR THORACIQUE SP

PRESCRIPTIONS
Aucune prescription

SOINS
Aucun soin
Clinical and para-clinical examination:

THE PATIENT WAS EXAMINED 15 DAYS AGO FOR AN EPIGASTRIC PAIN. THIS MORNING, HE WAKED UP CRYING WITH AN EPIGASTRIC PAIN.....

---

**OBSERVATION CLINIQUE**

**Examen clinique et para-clinique :**

LE PATIENT A CONSULTÉ IL Y A 15 JOURS POUR UNE DOULEUR EPIGASTRIQUE. CE MATIN, IL S'EST RÉVEILLÉ EN PLEURANT AVEC UNE DOULEUR EPIGASTRIQUE QUI IRRADIE DANS LA POITRINE EN RETROSTERNAL. L'INTERROGATOIRE PRÉCIS EST DIFFICILE. LE PATIENT AVAIT PEUR DE DIRE QU'IL AVAIT MAL À LA POITRINE DE RISQUE D'ÊTRE VIRE. LA DOULEUR EST DIFFÉRENTE DE CELLE D'IL Y À 15 JOURS. L'ELECTROCARDIOGRAMME A ÉTÉ ENVOYÉ PAR MAIL : PAS DE SIGNES D'ISCHÉMIE VISIBLE. LE PATIENT N'EST PAS PÂLE, IL N'EST PAS EN SUEURS. LA DOULEUR EST ÉVALUÉE À 10/10, LE PATIENT PLEURE. IL AURAIT EU UN ÉTOURDISSEMENT CE MATIN SANS Perte DE CONNAISSANCE.

<table>
<thead>
<tr>
<th>Pression Artérielle</th>
<th>127/7 minHg</th>
<th>Poids</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fréquence Cardiaque</td>
<td>51 / min</td>
<td>Taille</td>
</tr>
<tr>
<td>Fréquence Respiratoire</td>
<td>Température</td>
<td>35 °C</td>
</tr>
<tr>
<td>Saturation Oxygène</td>
<td></td>
<td>Douleur</td>
</tr>
</tbody>
</table>

**DIAGNOSTIC**

Diagnostic évoqué:
AD74 : DOULEUR THORACIQUE SP

**PRESCRIPTIONS**

Aucune prescription

**SOINS**

Aucun soin
Immediate evacuation /As soon as possible
COMPLEXITY OF ACCIDENT AND SICKNESS AT HIGH-SEA

- Helpers are medically not adequately qualified;
- No physician on board (Fishing Vessels)
- People under stress (MRCC personnel, shipping companies, crew)
Relevance

MRCC interventions….. 3/year (average)

Costs/evac $ ?........ € ?... /helicopter

Costs/evac $ ?........ € ?... /Vessel

Deviation duration 2 days/ship

Deviation costs $ ?........ € ? /day
Telemedical assistance today represents the most realistic prospect for providing seafarers with care.
- In this context, it is important to note the experience of the Italian TMAS in charge of medical assistance at sea: the Centro Internazionale Radio Medico (Center medical radio international) (C.I.R.M.) created in 1935.

- And the Toulouse Maritime Consultation Center (CCM) (France)

- Africa: South Africa  Morocco, Mozambique (GISIS)
The International Convention on Maritime Search and Rescue 1979 allows for parties to the Convention to provide on request from Masters of ships, medical advice, initial medical assistance or arrange medical evacuations for patients.
"Search and rescue service". The performance of distress monitoring, communication, co-ordination and search and rescue functions, including provision of medical advice, initial medical assistance, or medical evacuation, through the use of public and private resources including co-operating aircraft, vessels and other craft and installations;
Each Contracting Government undertakes to ensure that necessary arrangements are made for distress communication and co-ordination in their area of responsibility and for the rescue of persons in distress at sea around its coasts.
- ........(b) ensure that seafarers are given health protection and medical care as comparable as possible to that which is generally available to workers ashore, including prompt access to the necessary medicines, medical equipment and facilities for diagnosis and treatment and to medical information and expertise.
IAMSAR

- Volume I: *Administration and Management*
- Volume II: *SAR Planning and Co-ordination*
- Volume III: *On-scene SAR coordination, control, communication and operations*
- Circular MSC 960/2000

IMO Circular MSC 960/2000 informs or reminds States of the elements of a global system of medical assistance at sea and to encourage those which have not yet done so to set up such a system (which to a large extent uses existing elements), including an officially designated maritime telemedical assistance service.

There is now a general tendency to regard medical assistance at sea as an integral part of rescue
An optimal arrangement for medical assistance at sea is based on the following five elements:
- one or more RCCs;
- a telemedical assistance service (TMAS);
- means of intervention at sea;
- shore-based arrangements; - common operational procedures
Guidance on exchange of medical information between two telemedical assistance services (TMAS) involved in SAR operations for medical assistance at sea when an international co-operation is required.

MSC / Circ. 1042 May 28, 2002
Medical considerations for the use of the emergency medical kit/bag on ro-ro passenger ships, not normally carrying a medical doctor
Circular Letter No 3639 April 29, 2016

Telemedical Assistance Services (TMAS) questionnaire

Member Governments are invited to request their Rescue Coordination Centres (RCCs) to complete and submit the questionnaire, as set out in the annex, to the email address of the French Centre for Maritime Medical Consultation (ccmm.secretariat@chu-toulouse.fr)

For assessing the status of implementation of MSC/Circ.960 on Medical Assistance at Sea
GISIS DATABASE IMO
## Telemedical Maritime Advice Services / South Africa

### Information on Telemedical Maritime Advice Service

<table>
<thead>
<tr>
<th>Name of centre:</th>
<th>Cape Town Maritime Rescue Coordination Centre (CTMRCC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location:</td>
<td>PO Box 532</td>
</tr>
<tr>
<td>Address:</td>
<td>Parow 7499 South Africa</td>
</tr>
</tbody>
</table>
| Landline communications: | Telex: 095 521037  
E-mail: mrrcc.ct@samsa.org.za  
Mrcc.ct@samsa.org.za  
Tel.: +27 21 938 3300  
Fax: +27 21 938 3309 |
| Associated CRSs (if needed): | Cape Town Radio (ZSC) |
| Associated MRCCs or JRCCs: | ARCC Johannesburg |
| Possible consultation languages: | English |
| Remarks:        |                                                       |

©2017 International Maritime Organization [Disclaimer | Privacy Policy]
# Information on Telemedical Maritime Advice Service

**Name of centre:** Contact Moroccan MRCC Rabat and prefix the message with "Radio medico" and telemedical advice will be provided from a regional public hospital.

**Location:**

**Address:** Morocco

**Landline communications:**

**Associated CRSs (if needed):** MRSC AL HOCEIMA / MRSC TANGER / MRSC AGADIR / MRSC DAKHLA

**Associated MRCCs or IRCs:**

**Possible consultation languages:** English, French and Arabic

**Remarks:**

---

©2017 International Maritime Organization | Disclaimer | Privacy Policy
### Telemedical Maritime Advice Services / Mozambique

**Information on Telemedical Maritime Advice Service**

<table>
<thead>
<tr>
<th>Name of centre</th>
<th>MRCC Maputo (Posto Radio Naval)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location:</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td>P.O. Box 4317</td>
</tr>
<tr>
<td>Maputo</td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td></td>
</tr>
<tr>
<td>Landline communications</td>
<td>Tel.: +258 21 494 396</td>
</tr>
<tr>
<td></td>
<td>Fax: +258 21 494 396</td>
</tr>
<tr>
<td>Associated CRSs</td>
<td>Posto Radio Naval, Maputo</td>
</tr>
<tr>
<td>(if needed)</td>
<td></td>
</tr>
<tr>
<td>Associated MRCCs or</td>
<td>ARCC Maputo</td>
</tr>
<tr>
<td>JRCCs:</td>
<td></td>
</tr>
<tr>
<td>Possible consultation</td>
<td>English and Portuguese</td>
</tr>
<tr>
<td>languages:</td>
<td></td>
</tr>
</tbody>
</table>

**Remarks:**

[Back]
IN SUMMARY

1. Medical assistance is challenge most of the MRCCs are facing;
2. SAR services include provisions of medical assistance;
3. The MRCCs may put into place TMAS or establish contractual arrangements to provide the Telemedical Advice Service, from a Telemedical Advice Centre (TMAC).
Thank you for your attention!