TRAVEL TIME ACCESS TO NEAREST HOSPITAL VS. TRAUMA CARE IN DELHI, INDIA
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ABSTRACT

INTRODUCTION

• Road traffic crashes have been observed to be most common cause of injuries (70.8%) among trauma admissions (Chalya, Gilyoma and Dass, 2011a; Gururaj, G. M. S. et al., 2014).
• Particularly, in case of RTC’s, poly-trauma can be difficult to handle for hospitals without Intensive/Acute/ Trauma/ Emergency Care Unit. For this, Specialized care units/Level I trauma centres/ Acute Care centres are generally recommended(Harrington et al., 2005; Chalya, Gilyoma and Dass, 2011; Pal et al., 2014).
• A study in Rhode Island with one designated trauma centre mentions transfer protocol to trauma centre, if transportation time is less than 20 minutes and to the nearest medical facility if patients injured are beyond 20 minutes travel time from the trauma centre. (Harrington et al., 2005).
• While the final verdict/best practice is still undecided, certain guidelines reflect this distributed view on above issue.

OBJECTIVES

1. To estimate the on road driving travel time access to the designated trauma centre and geographically nearest hospital from each RTC.
2. To evaluate district wise trend of access to designated trauma centre and geographically nearest hospital from each RTC.

MATERIALS AND METHODS

REFERENCES


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