



ACET 2006 Summary

The meeting of the Academic Council of Emergency Medicine was held on 28th September, 2006 at the All India Institute of Medical Sciences, New Delhi. The meeting was a part of the INDO-US Emergency Medicine Summit 2006 held as a collaborative venture between the Division of Emergency Medicine, All India Institute of Medical Sciences, New Delhi and the University of South Florida, Tampa. The following Academic Councilors, appointed by the heads of their respective MCI recognized medical colleges in India, attended the meeting:

ACET Councilors for 2006-2007

Dr S Raghunathanan (Chennai)

Dr Sundara Kumar (Coimbatore)

Dr Pushp Raj Singh (Vellore)

*Dr Ashok C Upadhyaya
(Hyderabad)*

Dr Bhimo Singh (Imphal)

Dr Tarlika P Doctor (Ahmedabad)

Dr Sudesh Rao (Mangalore)

Dr Vineeta Goyal (Agra)

Dr Ajay Behal (Delhi)

Dr Rakesh Kumar (Delhi)

Dr Syed Amerzahoor (Srinagar)

Dr Devesh Patel (Baroda)

Dr S.Durai Rajan (Pondicherry)

Dr Sanjay Mehta (Mumbai)

Dr Anand Bijwe (Amarawati)

Dr Sunil Kumar (Delhi)

Dr CS Prakash (Annamalinagar)

Dr Tanu Raj Sirohi (Meerut)

Dr MMA Kambli (Srinagar)

Dr Sharad Vyas, (Ahmedabad)

Dr RPS Boparai (Amritsar)

Dr M.K.A Sherwani (Aligarh)

Dr Rajnish Joshi (Wardha)

Dr NS Senegar (Jhansi)

Dr Sanjeev Bhoi (AIIMS)

ACET 2006 India-Chairs

Dr Praveen Aggarwal (AIIMS)

Dr LR Murmu (AIIMS)

ACET 2006 USA-Chairs

Dr Tracy Sanson (USA)

Dr Kelly P O'Keefe (USA)

ACET 2006 Coordinators

Dr Ashish Goel (India)

Dr Sagar Galwankar (USA)

ACET-Faculty 2006

Dr David Orban (USA)

Dr Jason Johnson (USA)

Dr Bonnie Arquilla (USA)

INDUS-EM 2006 Councilor

Dr Amit Gupta (India)

The meeting began with opening remarks from Dr O'Keefe, Chair of the Academic Council. The meeting began with a brief background of the functioning of the Emergency Medicine System in United States, and its adaptation in an Indian model.

The meeting concluded that the following measures are urgently required in favor of improving the quality of patient care, medical education and research in the field of emergency medicine in India. The Council proposed the following:

1. Administrative issues relevant to the branch of Emergency Medicine were discussed and the following were proposed:
 - a. Separate Department of Emergency Medicine needs to be created in all medical colleges and government hospitals immediately and then efforts should be made to get specialty recognition from the Medical Council of India.
 - b. A cohesive co-ordination between para-medical and nursing staff is essential for better patient care in emergency. Co-operation among the trained paramedical and nursing staff can be achieved if these are directly under the Department of Emergency Medicine.
 - c. Pre-hospital care and hospital transfer should come under the purview of the Department of Emergency Medicine. It is necessary to develop a co-coordinated system for quick, comfortable and scientific transfer of the ill to the Department.

2. In the field of Medical Education it is essential that the following steps be taken to train and produce efficient and skilled doctors for taking care of patients in emergency:
 - a. Concerted efforts need to be made for the recognition of specialty and the curriculum of the Emergency Medicine by the Medical Council of India
 - b. A Curriculum of Emergency Medicine needs to be drafted for better training for undergraduate and postgraduate students. All members were encouraged to draft a model curriculum for undergraduate and postgraduate teaching.
 - c. A structured faculty development course is needed for scientific emergency patient care.
 - d. A speaker's bureau was formulated and councilors were encouraged to be a part of the bureau.
 - e. Tinitinali's Principles of Emergency Medicine, and Peter Rosen's Principles and Practice of Emergency Medicine were proposed by the Council as the standard text books for patient management in emergency care
 - f. A rotators posting in Emergency Medicine should be made essential for a defined period during the one year internship after MBBS.
3. The following steps are essential for an improved humane Patient care in the Department of Emergency Medicine:
 - a. Evidence based emergency care needs to be developed across the country for quick and scientific patient care based on the latest available scientific evidence.
 - b. It is difficult to keep abreast with the rapid advances in Emergency Medicine, and to provide the best possible care, a broadband high-speed internet access for emergency departments for instant and easy access to latest scientific evidence is essential at all times.
 - c. Standardized protocols for emergency patient care should be drafted for Indian settings
4. A coordinated program for Medical Research should be worked out and multi-centric, meaningful ethical research in emergency medicine should be promoted by the members of the Academic Council.
5. An annual academic meet of the Academic Council should be encouraged and held regularly in one of the medical colleges represented by the councilors present in the meeting. The objectives of this meeting should be the advancement of Emergency Medicine and promote young minds for conducting research in this field.
6. The Academic Councilors felt motivated to go back and work towards the advancement of the objectives of the Council.

The meeting came to an end with a vote of thanks to the Chair.

Praveen Aggarwal

National Chair: Dr Praveen Aggarwal
Professor, Emergency Medicine (AIIMS)