

**REFUGEE PATIENT TRANSFER ASSESSMENT AND EMERGENCY
TREATMENT AVAILABILITY
PRIZREN HOSPITAL**

GENERAL: The physical plant of the hospital was found to be intact and in good condition. Many of the supply closets could not be unlocked at this time for a complete inventory. We found the following regarding each department:

ER: There was a very acceptable ambulance drop-off with two usable stretchers. There is a reception desk as well as a single examination bed. The exam room has various emergency supplies including, suction, Adrenaline, Atropine, Dopamine, Flormidal, non-sterile gloves, IV tubing, solutions, suction catheters & Ambu Bags, but only enough for perhaps two or three cases.

Urgent Needs: Defibrillator
 Oxygen
 Medications
 Dressings
 Sutures
 Cardiac Monitor
 Pulse Oximeter
 CVP Lines

There is room for at least one more examination bed.

There is an elevator down the hall for transport of patients to the second floor operating room.

OPERATING ROOMS: There are two comfortable operating suites separated by an instrument sterilization room and supply room. In general, the supply of surgical instruments was good for trauma and orthopedic surgeries. The anesthesia machines are old but functioning as are the operating tables. The lighting is adequate. There are cautery units but they are not reliable. The same can be said for the air conditioning units. There is only one ECG monitor functioning. There are no pulse oximeters. There are some medications and dressings but only enough for about one week (depending on what is available in the locked cabinets). There are no automatic ventilators.

Recommendations: Oxygen
 Automatic ventilator (at least one)
 EKG monitor & pulse oximeter
 sutures (all types)
 Various anesthetic agents
 CVP lines
 IV Fluids
 IV Tubing
 Pneumatic Tourniquet
 Amputation Saw/Knife

RECOVERY ROOM/ICU: There are eight beds. Post-op patients are generally kept one to two days. The patients currently there appeared well cared for and the nursing staff seemed quite competent. Supplies are limited in this area. There is a relatively new anesthesia machine here with a ventilator and it is kept here for use of the ventilator portion.

Recommendations:

- Monitors (at least 2)
- Pulse Oximeters
- Full Oxygen Tanks
- Defibrillator
- Chest Tubes with Active & Passive Drain Capability
- Foley Catheters
- IV supplies
- Respirator (s)

SURGICAL WARDS:

There are 51 surgical beds and 50 orthopedic/urology beds. Most are open at this time. The lighting is adequate and the rooms are clean and comfortable. There are very few IV poles. To utilize all of the bed availability, more mattresses, linens, and pillows would need to be supplied. Various dressings are needed, as are medications such as antibiotics and analgesics.

OXYGEN: Currently the supply is almost depleted with many empty tanks available for use. Their supply source used to be in Jacova? and is no longer available. This is one of their most urgent needs to establish emergency room, operating room, recovery room and intensive care unit services.

ANESTHESIA: There are very few medications available for use. There would be an immediate need for supplies in anesthesia should patient/refugee transfers occur in the next few days.

AVAILABLE STAFF: We were advised that there are six general surgeons and one orthopedic surgeon currently on staff. More are expected but it is unknown when they will return. There are two anesthesiologists. The greatest deficiency seems to be in nursing. The nurses in the surgery department are surgical scrubs and responsible for the sterilization of supplies. They advised that circulating nurses are needed. The "acting" administrator stated that they were in the process of hiring staff immediately.

LABORATORY: Basic laboratory tests such as CBC, electrolytes, can be done immediately. The blood supply is very low and probably not enough to last more than one week. Blood is not available through the usual sources at this time. Aid would be needed in this area. In addition, they have the capabilities of taking blood from donors but type and cross matching reagents are needed. Currently they have none.

PATHOLOGY: Histopathology can be done if microscope and supplies are provided. There is a physician who can do these services.

PHARMACY: The pharmacy had been locked and we were advised that no one is to go in until it is checked for explosives and cleared by NATO.

SUMMARY: It is feasible to plan for the transfer of hospital patients currently in Kukes to the hospital in Prizren in the next few days. This would also be true for seriously ill or injured patients including those that get transferred by helicopter. There is plenty of landing area for choppers. The minimal requirement to move forward would be the availability of oxygen, food, monitors and medications.

GENERAL NEEDS LIST:

Exam Lights

Oxygen

Anesthesia Medications:

Prostigmine

Pentothal

Ketalar

Thammalol

IV Tubing

IV Fluids

IV Poles

Antibiotics (IV & Oral)

Tetanus

Monitors (ECG)

Pulse Oximeters

Ventilators

Plaster & Dressings

External Fixation Apparatus

Blankets

Sheets

Pillows

Beds

Drainage-Active & Passive

Foley Catheters

NG Tubes

Chest Tubes

Hand Dermatome for Skin Grafts

Amputation Saw

Amputation Knife

Debrillators

Scrub Clothing

White Lab Coats

BioHazard Waste Containers

Microsurgery Pkg

Gloves (sterile & non)

New Gurneys

Sterile Instrument Wrapping Material

CVP Lines

Synthetic Graft Materials

New Cautery Units

Suture (various sizes)

Operating Microscope for Eye Surgery

Loupes

Sterile Barriers

Burn Dressings

Scrub Brushes for Surgery

Mattresses

CENDRA SHENDETESORE PRIZREN
 REPARTI HEMODIALIZES
 DATA 15 6 1999
 P R I Z R E N

NEVOJAT URGJENTE E REPARTIT HEMODIALIZES

Ne repartin e hemodializes ne Prizren momentalisht ne programin kronik te hemodializes gjinden 80 pacijenta. Pacijentat jane prej ketyre komunave: Prizren, Suha Reke, Rahovec dhe Dragash. Per shkak numrit te madhe pacijenteve-puna vijon ne 3 ndrime.

Situacioni ne repartin tone eshte tejte i rend per arsye te mungeses se aparateve te reja per hemodialize, pjeseve rezerv dhe materijalit hargjues. Prej gjithesej 19 aparateve me te cilat punojm te gjitha jane ne perdorim mbi 5-12 vjet, ja 7 vjet ar, amortizuar. Prishjet te shpeshta shkaktojne problema ne punen tone te perditeshme. Procesi i dijalizes me keto aparate vijon me komplikime te ndryshme. I vetedijshem qe dijaliza per shkak te kompleksitetit te procesit duhet te kryhet vetem me aparate qe teknikisht jane ne rregull. Per keto arsye urgjentisht duhet aparatet te vjetruara me zavendesua me te reja dhe me nje sasi te konsideruesme pjeseve rezerve per keto.

Repartit duhet te furnizohet me keto mjete:

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|---|------------|
| 1. APARATA PER HEMODIALIZE "FREZENIUS 2008 C" | 20 aparat |
| 2. PJESE REZERVE PER APARATA FREZENIUS | |
| 3. SISTEM I OSMOSES REVERSE "MD 4000" | 4 sistema |
| 4. KREVET VAGA | 20 kreveta |
| 5. IONOMETER "EF-HK" ME REAGENSA ADEKUATE | 2 aparata |
| 6. PEANA /te drejta/ | 50 copa |
| 7. UNIFORMA DHE MANTILA PER PERSONELIN MJEKSOR | |
| 8. MATERIJAL HARGJUES PER HEMODIALIZE DHE DIALIZE PERITONEALE | |
| 9. DOUBLE LUMEN DIALYSIS SET 11F/15 (CATHETER) | 20 seta |

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