

Activity Report
Emergency Telemedicine Response among TEIN3 Communities
A TEIN3 Application Workshop

Duration
August 29-30, 2012

Organizing Bodies
Pakistan Education and Research Network (PERN)
Bangladesh Education and Research Network (BdREN)
TEIN3
DANTE

Technical Experts
Holy Family Hospital Team, Rawalpindi, Pakistan

Introduction:

A workshop was proposed by Pakistan Education & Research Network (PERN) regarding `Emergency Telemedicine Response among TEIN3 Communities` whose proposal was accepted by DANTE/TEIN3. The said workshop was conducted from August 29th to August 30th, 2012 spanning on two full days. The workshop was organized in Holy Family Hospital, Rawalpindi (a partner of Pakistan Education and Research Network (PERN)), TEIN3 members and all the interested research and education communities were invited to remotely participate in the event through Video Conferencing.

The Agenda along with the connectivity parameters of the workshop was floated among all TEIN3 members, GDLN Community members and the partner medical universities under the PERN Network in order to achieve maximum benefits out of the said workshop. All the expected participants were informed to get the said VC Link tested prior to the start of the event. Unfortunately, none of the TEIN members and GDLN community members participated in the workshop neither they approached for the testing of the said VC link; however, medical universities within Pakistan participated in the event. Some of the participating universities include Dow University of Health Sciences (DUHS), Karachi, Liaquat University of Medical & Health Sciences (LUMHS), Jamshoro, Aga Khan University (AKU), Karachi, National University of Science & Technology (NUST), PMA Kakool.

Workshop Proceedings:

The workshop started with registration of the participants. Prof. Asif Zafar was not able to deliver welcome address. However, Dr. Naeem Zia welcomed all the present audience on the site of Lecture (Auditorium Surgical Unit II, Holy Family Hospital, Rawalpindi) and remote connected sites as well. Dr. Naeem Zia introduced the training procedures, training Staff and the facilities available at the Training Center. Dr. Naeem further explained about connectivity procedures, health care procedures, and telemedicine tools. The audience was briefed with the basics of Telemedicine that involved the connection protocols and role of telecommunications in the development of telemedicine solutions.

Dr. Faisal Murad while speaking to the audience explained about the two fundamental types of Telemedicine i-e Store & Forward Technique and Real Time Video Applications. The worthy speaker also shared some of his experience during the live operative procedures done through Telemedicine.

After Lunch break, Dr. Saira was educating the audience regarding Tele ENT Services for Rural Areas of Pakistan. She discussed different case studies for the Tele ENT sessions done in cities of Pakistan like Khusab, Gujrat, Attock, Pindi Gheb and Rajan Pur.

Other Lectures that were delivered include Dr. Waqas and Dr. Adnan who discussed about `Home Telemedicine and Telepathy` and `Clinical Applications & Case Studies of Tele-dermatology` respectively. Day 1 was concluded by Dr. Naeem Zia with the remarks that the developing countries like Pakistan are in more need of Technologies like Telemedicine as a smaller Telemedicine Setup doesn't requires much Bandwidth and the consultations in all the fields of medicine can be easily provided to the poor of rural areas of any developing country.

Day 2 started with the Lecture of Dr. Qasim Ali that was about privacy-issues, confidentiality and security in Telemedicine. He stated that the electronic recordings, storage, transmission and retrieval of patient's disease and bio data are the major issues faced for patients' privacy. He stressed upon the policy options that need to be constituted and to be strictly looked upon.

Dr. Saira after refreshing from her last Lecture spoke for the scope of Tele-dermatology for Rural Areas of Pakistan. Dr. Saira also expressed about her experience with Ultrasound procedures and Gynecology cases

during the sessions of Telemedicine done in the Five Tele-medicine Centers in Attock, Khushab, Gujrat, Pindi Gheb and Rajan Pur working under Holy Family Hospital Rawalpindi.

Afterwards, there was a lecture by Mr. Shamy Bin Mansoor who is an Engineer from School of Electrical Engineering and Computer Sciences (SEECs), NUST working for Telemedicine. He delivered his lecture regarding Tools and Technology for Disaster Management and Telemedicine`s Role in Disaster Management. He discussed some of the useful open source softwares including Ushahidi, Sahana, Mayon etc. The software like Ushahidi by Kenyans allows reports by mobile phone SMS, MMS and Internet to be aggregated into real-time map. Ushahidi helps in identifying priority areas for relief efforts. Dr. Shahzad elaborated the audience with installing a simple Telemedicine Setup.

Day 2 ended with the online session of Dr. Asif Zafar and Dr. Cosmas Zavazava who joined from Geneva, Switzerland. They were talking about Emergency Telemedicine Response during Flood in Pakistan 2010 and ITU Role in Disaster management that was a source of keen interest for the worthy Audience. The conference ended with the Question Answer session from the students and practicing doctors of Pakistan`s medical universities.

Expectations

We at PERN believe that such type of application workshops will raise awareness of the benefits of using telemedicine in an emergency. This workshop has specifically helped in demonstrating the role of an ICT infrastructure in dealing with disasters. However, NRENs need to explore ways of gaining benefit from NRENs` communication setup in triggering emergency telemedicine response in the most efficient and swift manner.

The Audience and the speakers were hopeful from HEC/ PERN that the series of trainings regarding Minimal Access Surgery and Minimal Invasive Surgery during 2012-13 will continue and help in further improving the capacity of the people, and improvements in Emergency Telemedicine response will be possible.