Road Accidents Management and Emergency Medicine Care.

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Abstract

Background: Traffic accident is when only material damage is caused to the vehicle, track or environment, and there are no casualties. Traffic disaster is such an event in which, besides the material damage, there are human casualties. Traffic disaster is such an event in which, besides the material damage, there are human casualties.
Aim: Provision of emergency medical care in all phases of the management of injured persons in traffic accidents with basic and abnormal trauma support in order to reduce: morbidity, validity and mortality and increasing the quality of EMS.
Materials and methods: Samples of the survey were only injured in traffic accidents and the main causes were; age, sex, place of residence, seasons, weekdays and months, sleepwalking, drug use, alcohol consumption, and medical assessment, poor quality of roads, speed overtaking, car testing, illness, mobile phone use, eating in the car radio CD player.
Result: The research material was obtained from the UCCK - Clinic Clinic in Pristina archive for January - December 2015 and January - October 2016. Research samples were only injured in traffic accidents. In Kosovo, the Emergency Clinic for January-December was 55.294 / 9.32% and 66 injured / 0.11%. Over 3 400 people die in the world's streets every day and tens of millions of people are injured.
Conclusions: EMS should be equipped with medical staff, medicines, medical equippment, concrete materials, ambulances with the aim of providing basic and advanced care to the nearest hospital. Educate and train emergency medical professionals with basic and advanced trauma training courses, especially the hospital and prehospital level, and be incorporated as a first class subject at all levels of school.
Keywords: *traffic accidents, injuries, illnesses, EMS, medical care*

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Introduction

Traffic accident is when only material damage is caused to the vehicle, track or environment, and there are no casualties. Traffic disaster is such an event in which, besides the material damage, there are human casualties. Traffic disaster is such an event in which, besides the material damage, there are human casualties. Accidents in road traffic in Kosovo and in the world are taking many human lives, causing; Injuries, Invalidity, Death, Economic Problems,

Family and Multiple Tendencies. Despite the fact that traffic injuries account for only 2.2% of all road accidents and this represents about 33% of annual spending in the US (about $ 40 billion). It has been reported that 50% and 10% of damage due to road accidents is related to head, neck and spinal injuries. In Croatia, in the land of calamity, they die; 53% during hospital transportation, 20% during hospital treatment and 27% of injured persons.

Worldwide, about 54 million people are injured in road accidents. About 1.4 million deaths occur annually. Average income countries have the highest rate that brings 20 deaths per 100,000 inhabitants. While the death rate in Africa is higher (24.1 per 100,000 inhabitants), while the lowest rate is in Europe.

Epidemiology

In the US, the main cause of morbidity and mortality in road traffic is the young age of the population. Light and moderate injuries 224,000 injured. Severe injuries 14,100 injured. Reported 9,000 deaths. While in Kosovo, the Emergency Clinic for January-December was 55.294 / 9.32% and 66 victims / 0.11% dead. More than 3 400 people die on the world's roads each day and tens of millions of people are injured. Children, pedestrians, cyclists and older people are among the most vulnerable to traffic injuries.

Causes: Poor quality of roads, speed overtaking, sleeping patterns, sleepwalking, drug use, alcohol, illness, mobile phone use, eating in the car, radio CD player, distracting attention in case of an accident that is encountered in the street, of the day, the impact of the environment, fatigue, health deficiencies and erroneous estimates or late warning of danger.

Purpose

Provide medical care at all stages of the management of injured persons in traffic accidents with basic and abnormal support of trauma in order to reduce: morbidity, validity and mortality. problem solving, various complaints, advice and possible

solutions to managing injured multiple injuries, enhancing the quality of EMS.

Methodology

The research material was taken from the UCCK - Emergency Clinic in Prishtina archive for January - December 2016 and January - December 2016. Research samples were only injured in traffic accidents and the main causes were; age, sex, place of residence, seasons, weekdays and months, sleepwalking, drug use, alcohol consumption, and medical assessment, poor quality of roads, speed overtaking, car testing, illness, mobile phone use, eating in the car radio CD player.

Results

The research material was obtained from the UCCK - Clinic Clinic in Pristina archive for January - December 2015 and January - October 2016. Research samples were only injured in traffic accidents.

Year	Number of cases	%
January-December 2015	47.543/ 4820	10.13
January-December 2016	55.234/ 5150	9.32

Table 1: *Number of cases by years*

Age	*Number of cases*	*%*
15- 25	*450*	*8.78*
25-35	*2576*	*5040.*
35-45	*1080*	*20.90*
45-55	*955*	*18.20*
Over 65 yrs.	*89*	*1.72*
Total	*5150*	*100*

Table 2: *Number of cases by age*

The number of cases with traffic accident injuries was greater in 2015 were 5150 cases or 9.32%.. The number of cases by age in traffic accident was 25-35 years with 1080 cases or 50.40%. The number of cases per gender is dominated by men with 4980 or 96.69% of cases in contrast to women 170 cases or 3.31%.

The largest number of cases by season is in the summer 2400 cases or 46.74%. The highest number of cases per day, Evening 2417 cases or 46.95%, courses in morning 1090 cases or 21.16%, midnihgt 1293 cases or 25.10% and MIDDAY 350 cases or 6.79 %.

Sex	*Number of cases*	*%*
Male	*4980*	*96.69*
Female	*170*	*3.31*
Total	*5150*	*100*

Table 3: *Number of cases by sex*

Seasons	Number of cases	%
Spring	1680	12.26
Summer	2400	46.74
Autamn	740	29.79
Winter	320	11.21
Total	5150	100

Table 4: Number of cases by season of year

Day - Night	Number of cases	%
Morning	1090	21.16
Midday	350	6.79
Evenning	2417	46.95
Midnight	1293	25.10
Total	5150	100

Table 5: Number of cases per day - night

Causes of traffic accidents	Number of cases	%
Ilness	**1470**	**28.54**
Alcohol	**655**	**12.74**
Drugs	**275**	**5.33**
Without health problems	**2750**	**53.39**
Total	**5150**	**100**

Table 6: Number of cases according to the causes of accidents

Causes of traffic accidents	Number of cases	%
Using mobile phone	781	15.16
Eating in the car	344	6.67
Radio CD player	322	6.25
Others	3703	71.92
Total	5150	100

Table 7: Number of cases according to the causes of traffic accidents

Emergency medical care	Number of cases	%
With low emergency medical care	**2322**	**45.08**
With optimal emergency medical care	**2676**	**51.96**
With high emergency medical care	**152**	**2. 96**
Total	**5150**	**100**

Table 8: Number of cases according to the causes of traffic accidents

The number of cases according to major causes were 1470 cases of 28.54%, courses with alcohol were 655 cases or 17.74$, with drugs were 275 cases or 5.33% and without health problems were 2750 cases or 53.39%.

Number of cases according to the causes of traffic accidents with Using mobile phone were 781 cases or 15.16%, with Eating in the car were 344 cases or 6.67%, with Radio CD player were 322 cases or 6.25% and others were 3703 cases or 71. 92 %. Number of cases and type of transport with With low emergency medical care were 2322 cases or 45.08%,

With optimal emergency medical care were 2679 cases or 51.96%, and With high emergency medical care 152 cases or 2.96 5. with number of cases and type of transport yes were 2781 cases or 54.00% and no 2369 cases or46.00%. Number of cases and type of transport With autoambulance 1992 cases or 38.68%, and Private cars 3158 cases or 61.32%.

Equipment and tools	*Nr.cases*	*%*
YES	2781	**54.00**
NO	2369	**46.0**
Total	5150	100

Table 9: *Number of cases and type of transport*

Types of transport	*Number of cases*	*%*
Private cars	*3158*	*61.32*
With autoambulance	*1992*	*38.68*
Total	*5150*	*100*

Table 10: *Number of cases and type of transport*

Discussion and conclusions

EMS should be equipped with medical staff, medicines, medical consumables, concrete materials, ambulances in order to maintain health, treatment at the scene, transport stabilization and medical care to the nearest hospital. For people with light body bodily light injuries, they should be largely treated out of the box and leave no long term consequences either in functional or aesthetic terms.Sore and moderate bodily injuries should be provided with medical care only by EMS 112 and, after stabilization, should be shipped as soon as possible to medical care at the nearest hospital for monitoring, diagnosis and definitive treatment. Epilepsy patients with severe heart, brain, and malignant illnesses should not drive the car or issue a driver's license without being assessed in medical terms. The road police if they attack a car in the driving force and the stimulus will have to stop the car and invite EMS. Driving licenses must not be issued without a medical certificate and strictly verified by an Authorizing Committee. Road traffi c crashes are predictable and therefore preventable. In order to combat the problem, though, there needs to be close coordination and collaboration, using a holistic and integrated approach, across many sectors and many disciplines. All drivers of cars under the influence of alcohol must pay all their pocket expenses as a cause of the accident. EMS and Police Services that provide support to the accident site, to be regulated with a sub-legal act for those who cause an accident, from their pocket to cover the costs of which services are not covered at all. Educate and train emergency

medical professionals with basic and advanced trauma training courses, especially hospital and hospital level. To be incorporated as a subject First aid at the lower secondary school level and at Universities as compulsory subjects. Campaigns for educating campaign participants, schools and communities should be organized.But unfortunately in Kosovo , there is no fully operational system for emergency preparedness, response and evaluation.

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