

## **“MEDEVAC” Programme - A Successful Governmental Project for Humanitarian Assistance to Civilian Populations in Times of Crisis**

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### **ABSTRACT**

*The Czech Military Medical Services have been involved in providing humanitarian assistance to the civilian population in different countries which suffered either natural disasters (earthquakes – Turkey, Pakistan) or military conflict (Serbia and Monte Negro / Kosovo, Iraq, Afghanistan, Cambodia, Libya, Barma, Syria). Thanks to mutual co-operation between the Home Office, the Ministries of Defence, Foreign Affairs and Health, a complex project known as „MEDEVAC“ was undertaken. This project is designed mainly for child-patients who have little possibility of local medical treatment. In total, 165 patients have received comprehensive, mostly surgical, treatment in various specialised Prague hospitals. The Czech government earmarked a special budget for this project for each year. Military medical personnel, supplemented by appropriate civilian specialists (mostly paediatric cardiologists), carried out selection and diagnostic-procedures through enhanced field-hospital facilities; transportation of patients was also organised by the military. Each child was accompanied by one adult family-member, usually mother or father. The Home Office solved the most complicated problem of imigrant-status for the children and their accompanying adults by granting them temporary asylum-seeker status, while the Ministry of Health guaranteed the provision of highly-specialised health-care providers in different University Hospitals in Prague. In order to standardise handling-sequences and co-ordination-procedures, specific medical criteria of the „MEDEVAC“ Programme were predicated. Humanitarian assistance provided to local populations has become a permanent additional task for the Czech Military Medical Services during crisis-response operations. A high level of co-ordination and co-operation between national and international civilian and military authorities must be maintained if future projects are to be successful.*

### **1. INTRODUCTION**

From the late 1990s, the Czech Military Medical Services have been involved in providing humanitarian assistance to the civilian population in different countries which suffered either natural disasters (earthquakes – Turkey, Pakistan) or ethnic / military conflict (Serbia and Monte Negro / Kosovo, Iraq, Afghanistan). These deployments were a completely new phenomenon for the armed forces of a former Warsaw Pact country. Any mission outside home-territory was not possible under the then prevailing doctrine. At the end of the Cold War era, substantial changes in the doctrine of our military forces took place. This is what allowed the Military Medical Services to „pave the way“ in providing disaster relief and

humanitarian aid in missions outside the Czech Republic. Indeed, having the personnel and material resources available, it was also felt that the active involvement of the military in some non-military situations might be an effective and, sometimes, requisite crisis-response. An overview of recent deployments of the Czech Military Medical Services is shown in Table 20-1.

**Table 20-1: Main recent deployments (CZ Army Field Hospitals or Field Surgical Teams).**

- May 1999 – November 1999: Albania, Turkey (AFOR)
- May 2002 – January 2003: Afghanistan (ISAF I,II)
- January 2003 – April 2003: Afghanistan (FST – ISAF III)
- April 2003 – December 2003: Iraq (IZ SFOR)
- June 2004 – May 2005: Iraq (FST MND SE)
- November 2005 – January 2006: Pakistan (Winter Race)
- December 2006 – January 2008: Afghanistan (ISAF)

## **2. FORMS OF HEALTH-CARE SUPPORT**

In most of these missions, the provision of medical care to the local population has been the main purpose for the deployment of medical units. Small units (level ROLE 1) have been supporting local communities for years – e.g. in Kosovo within the KFOR operation. There are many Kosovar and Serbian families, as well as small communities, living in remote, rural areas along the Serbian borders being substantially medically supported by Czech Military Medical personnel on a regular primary-care basis. Other forms of help are given to local health-care through the provision of, and participation in, professional activities for local, medical personnel; seminars, conferences and practical training-exercises (Bosnia and Hercegovina, Iraq, Afghanistan). These events are, perhaps, the most effective ways of promoting local medical care. A higher level of support is an attachment (up to 2-3 months) for foreign doctors to our teaching hospitals to educate them in specific aspects of, for example, after-surgery care. Iraqi pediatricians were taught in Prague how to provide cardiological care for those Iraqi children who had been operated on in Prague. Thus, the aftercare for patients treated in Czech hospitals can be more effective after their return home.

## **3. MEDEVAC PROJECT**

In seeking to create a system which would make it possible to provide specialised care for, at least, some children (and some adults, too), it was necessary to bring together representatives of more institutions at government level. Thanks to mutual co-operation between the Home Office, the Ministries of Defence, Foreign Affairs and Health, a complex project known in the Czech Republic as „MEDEVAC“ was undertaken. This project is designed mainly for child-patients who have little possibility of local medical treatment. The leading role in co-ordination and financial support from the Government was taken over by the Home Office. The Ministry provides the funds and, among other taskings, has solved one of the main legal and procedural problems of bringing foreign patients to be treated in the Czech Republic. Patients are granted – on a temporary basis – the status of asylum-seekers, which includes one adult from the family. In this way, the victims are entitled to the appropriate medical care. As soon as the treatment (mostly surgery and recuperation) is finished, the asylum-seeker status expires and the patients, with their guardians, are flown home. All transportation for Project „MEDEVAC“ is undertaken by the military. For flights in both directions, spare capacity in military aircraft is used. Usually, patients travel in a group together with medical personnel on rotation-posting abroad.

### **3.1 Procedural stages of MEDEVAC**

1. pre-selection of suitable patients at the field hospital
  - consultations with specialists in Prague using telemedicine
  - specialist on the spot
2. diagnoses verification
3. air-transportation to Prague
4. quarantine period in hospital
5. specialised treatment followed by recovery as needed
6. return to home country

Pre-selection for treatment in the Czech Republic is carried out by military medical personnel on patients arriving at the hospital from different sources; some recommended by local doctors or voluntary medical personnel, and some casual. Since recently, a small team of two paediatricians / cardiologists, has been sent to the field hospital for about 7 – 10 days to check preliminary recommendations, and to perform more specialised examinations (ultrasonocardiography). The selected children and their guardians undergo all necessary administrative procedures. These procedures include the signatures of consent of their parents for treatment in the Czech Republic, and agreement on repatriation when the treatment has been finished. Upon arrival in Prague, all patients and their escorts are hospitalised at the Dept. of Infectious Diseases to undergo series of tests in quarantine. All examinations relevant to surgery and general anesthesia on children are also carried out. Upon completion, the patients are transferred to their specific departments according to their diagnoses; mostly to cardiosurgery, plastic surgery, and the burns department.

### **3.2 The specialised and administrative work**

The specialised and administrative work in the field hospital for „Operation MEDEVAC“ includes:

1. pre-selecting a patient with a suitable diagnosis for specialised medical treatment in the Czech Republic. This is based on factors of reasonable risk and realistic chances of recovery. The diagnosis should be of a condition which seriously threatens the health or life of the patient in the short-term, but the patient must be capable of being transported to the Czech Republic with no special arrangements.
2. Obtaining the consent of the family for medical treatment abroad.
3. Despatch of a medical report and photographic documentation to a medical facility in the CR; consultations leading to acceptance of the patient.
4. When the patient has been accepted, the necessary laboratory- and imaging-examinations of the patient and the accompanying person are carried out.
5. A medical report on the patient and accompanying person is prepared.
- 6., The appropriate documents for entry into the CR and for medical treatment under the MEDEVAC programme are prepared (consent of the legal representative for the medical treatment; asylum-application; power-of-attorney for the accompanying person if the person is not a legal representative).
7. Providing the parents and the accompanying persons with appropriate information; gathering them together and accommodating them the day before departure

Up to the end of 2007, a total of 114 patients received comprehensive, mostly surgical, treatment in various specialised Prague hospitals. These included 38 children from Iraq, predominantly with congenital heart-diseases, and 10 from Pakistan, following the earthquake of December, 2005.

**Table 20-2: Patients treated within the MEDEVAC Programme till February, 2014.**

Bosnia and Hercegovina	17 patients
Kosovo	40
Iraq	42
Chechnya	1
Pakistan	10
Afghanistan	14
Cambodia	7
Libya	17
Myanmar (Barma)	3
Syria	14
Ukraine	27
<b>TOTAL</b>	<b>192 patients</b>

The Czech government has earmarked a special budget for this project for each year. In order to standardize handling-sequences and co-ordination procedures, specific medical criteria for the „MEDEVAC“ programme were determined.

### **3.3 Medical Criteria (Indications and Contra-indications) of the MEDEVAC Programme**

A. General definition of diagnoses of medical conditions suitable for treatment in the Czech Republic:

- the illness is life-threatening over a period of weeks or months
- the illness is not treatable in the country of the patient’s origin
- the illness is ideally completely treatable in the Czech Republic
- the length of treatment should not exceed 3 – 4 months (optimally for a single treatment).

B. Examples of suitable diagnoses:

- congenital heart-disease with a possibility of full correction
- war-injuries, complicated fractures requiring reconstructive surgery
- sequelae following burns-injuries
- cleft-lip, cleft-palate
- congenital urogenital deformities.

C. Primary unsuitable health-conditions:

- most of the haematological and oncological illnesses
- diseases treatable only by palliative procedures
- illnesses requiring repeated surgery
- congenital diseases of the locomotive system requiring long-term specialised and rehabilitation care
- congenital, chronic, metabolic illnesses.

The level of co-operation and co-ordination among the four ministries of the Czech government has proved to be highly functional and effective. The experience has proved positive to all Czech participants, and has been well-accepted internationally.

#### **4. CONCLUSION**

Provision of humanitarian assistance to local civilian populations has become a permanent additional tasking for the Czech Military Medical Services during crisis-response operations. These challenges require new qualitative approaches to personnel-education and -training (such as the addition of a pediatrician to the medical staff) as well as to material- and technical-support. A high level of co-ordination and co-operation between national and international civilian and military authorities must be maintained if future projects are to be successful. Recent events in Ukraine and organizing transfer of 27 patients and their treatment in Prague have confirmed the MEDEVAc project is a well organized system of international humanitarian assistance.

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