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Ramathibodi Poison Center’s role as a great pillar in the fight against poisons

As chemicals are everywhere around us, we all can fall prey to many kinds of poison. Globally, poison incidents exceed the number of professionals who can provide proper help. Fortunately, Thailand has “Ramathibodi Poison Center” to tackle this serious problem.

Established in 1996 under the Faculty of Medicine, Ramathibodi Hospital, Mahidol University, the center started small with only a few staff members who worked 24/7, recounted Prof. Winai Wananukul, Director of Ramathibodi Poison Center.

In its early days, the center faced several obstacles, including the high cost of toxicology databases and regional database creation with indigenous venomous animals. One of the biggest challenges was that antitoxins and antivenoms were not oftenly used, not easily available, and some were even expired or sometimes unstable at critical times.

The poison center had been solely funded by Faculty of Medicine Ramathibodi Hospital. In 2005, the National Health Security Office (NHSCO) financially supported the center to set up a one-stop-service call center for the public. Later, in 2010, it collaborated with the Health Ministry and the Food and Drug Administration (FDA), and Queen Siravabha Memorial Institute (QSMI) and National Institute of Development Administration (NIDA) to realize the goal.

Today, the center is determined to treat patients from all regions of the country regardless of their pre-conditions. As one of the eight centers of excellence of Ramathibodi Hospital, Ramathibodi Poison Center believes that the heart of toxicology is to save critical patients before it is too late. Thus, the center is determined to treat patients from all regions of the country regardless of their health care coverage schemes, ethnics, and pre-conditions.

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Phaholpolpayuhasena Hospital: The original “One Day Surgery”

O ne Day Surgery (ODS) has been well-established in the medical field for quite a while, but it was only recently, after the Ministry of Public Health issued a policy to have ODS featured in provincial hospitals, that the public learned about this practice. Nevertheless, Phaholpolpayuhasena Hospital has in fact been offering ODS services for over 20 years, since long before the Ministry’s announcement.

Dr. Witun Phanthabodhorekan, Surgical Specialist at Phaholpolpayuha-sena Hospital in Kanchanaburi and one of the ODS pioneers, said that the hospital initiated the practice to solve the problem, as many patients 20 years ago. Back then, the common practice was to perform surgery with the patient under anaesthesia which required patients to be admitted to hospital one day prior and rest one to two days after the operation before being discharged. This led to overcrowded wards with no room to treat other imperative cases.

Inscribed by initial hernia surgery that uses a local anaesthetic applied to the targeted part of the body and helps patients recover faster, Dr. Witun studied and expanded the practice to other types of surgical operations. In 2015, he developed an ODS guideline with anaesthesiologists, leading to standard treatments with no complications or deaths. Later, in 2017, a One Stop Operation Centre was established to streamline the treatment process. Every step from first appointment and nursing and to patient preparation and anaesthetic assessment is conducted at the centre.

The unique feature of ODS is that patients’ relatives are involved in the care process under the supervision of a professional nurse.

“The relatives and patients receive health literacy instruction from the hospital,” explained Dr. Witun. “Patients are prepared at home by the relatives. At the initial appointment, the nurses teach the relatives about the surgery and the post-operation and give them a schedule and contact details. Then they receive calls for the surgery and preparation guidelines. Four days and one day prior, the hospital calls to assess whether the patient is ready for the operation. The calls not only benefit patients in terms of their readiness but help the hospital to operate smoothly and not be delayed by transplanting back and forth. After the surgery, an assessment is conducted prior to discharge. If patients want to rest at the hospital, they are welcome to do so. However, when asked usually prefer to go home at one to two days after the operation before being discharged. This led to overcrowded wards with no room to treat other imperative cases.

One of the main operations is the fund is to help disabled and elderly people who find it hard to access public health because without a helping hand they will suffer more. The fund sees the importance of the public sector helping as well as involvement of local communities. Saraburi PAO brings local people into the project because, after patients leave hospital, the best support is from the community.

One of the main operations of the fund is to help disabled and elderly people. For example, bathrooms are built for the elderly, making the handrails, making the floor smooth and creating ramps. Another project involves tool storage for over 30 borrowed medical instruments, including low rise beds, arm mattresses, and oxygen generators.

Mr. Sujin Boonmalert, Deputy Chief Administrator of Saraburi PAO, said the vision of the fund is to help disabled and elderly people who find it hard to access public health because without a helping hand they will suffer more. The fund sees the importance of the public sector helping as well as involvement of local communities. Saraburi PAO brings local people into the project because, after patients leave hospital, the best support is from the community.

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Bhumibol Adulyadej Hospital shows the right way to build trust with partnered clinics

It is a tertiary hospital under the Directorate of Medical Services, Royal Thai Air Force. One of the first to join the universal health coverage scheme, it serves as many as 200,000 people every year.

In order to take care of patients thoroughly, covering primary care to critical care, and reduce congestion in the hospital, in 2006 the hospital collaborated with the National Health Security Office (NHSO) to find 25 private medical centers. However, partnering clinics and taking patients who need primary care services, Bhumibol Adulyadej Hospital did not directly translate into the patients’ trust. Meanwhile, Bhumibol Adulyadej Hospital remains committed to supervising service standards and has come up with several projects to achieve this.

One of them is to build primary care networks with clinics in the area called primary care trust. Bhumibol Adulyadej Hospital has worked closely with the clinics not only in land management but also capacity building to ensure quality of services by the clinics. Currently, over 155,000 of primary care visits can be provided at clinics instead of hospital. Therefore, patient satisfaction is increase because they can access to the service near their home and do not have to wait in a long line in hospital, and they can still get services from hospital when needed. Furthermore, this can reduce hospital congestion.

Vice Marshal Thaweepong Pajareya, Director of Bhumibol Adulyadej Hospital, said the project has significantly reduced the number of primary care patients. Only 10%-15% of chronic patients are sent back to the hospital. This helps Bhumibol Adulyadej Hospital focus on more difficult tertiary cases.

Another important project is “E-Referral Healthcare System” where some of the referral processes are reduced or made more convenient. In collaboration with the National Electronics and Computer Technology Center (NECTEC), Bhumibol Adulyadej Hospital has developed a cloud-based database whereby partnered clinics and hospitals can share patients’ information in real time. Patients can save their time and money and the treatment procedure runs more smoothly.

Vice Marshel Thaweepong explained that the system is fully electronic yet due to some issues, such as staff experience and lagged Internet connection, E-Referral Healthcare System now covers 92% of all information and going forward the hospital aims to cover it to 95%.

In addition to having better connectivity between the hospital and primary care partnered clinics with both projects, Bhumibol Adulyadej Hospital is implementing a process called “Application for Patients” with support from the Department of Development Agency (Public Organisation), Bhumibol Adulyadej Hospital launched an application called “BHA Connect” on 3 December 2019 that allows patients to make an appointment and browse their medical records.

“In the next phase, we wish to push patients to start taking better care of their health,” said Air Vice Marshal Thaweepong.

He concluded: “Every project aims to build an integrated service with central focus on excellent primary care and further it with the E-Referral Healthcare System and application. Our goal is to ensure that patients receive high standard of treatment. We can build the trust of the people we serve.”

His Royal Highness Prince Mahidol of Songkla was born on January 1, 1892, a royal son of Their Majesties King Rama V and Queen Savang Vadhana of Siam. In 1912, His Majesty King Rama VI commissioned him as a lieutenant in the Royal Thai Navy.

The Prince Mahidol Awards are conferred on an annual basis with prizes worth a total of approximately US$100,000. A Committee, consisting of world-renowned scientists and public health experts, recommends a selection of laureates whose nominations must be submitted to the Secretary-General of the Foundation by May 31st of each year. The committee will decide on the number of prizes to be awarded annually, which may not exceed two in any one year. The prizes are given for outstanding performance and/or research in the field of health for the benefit of mankind and for outstanding contributions in the field of health for the sake of the well-being of the people. The two categories are set apart in commoration of His Royal Highness Prince Mahidol’s graduation with a Doctor of Medicine (cum laude) degree from the Royal University of Thailand in 1915.

The Prince Mahidol Award Conference was first organized in 1998 to celebrate the 4th Prince Mahidol Award ceremony. It is held again in 2002 to celebrate the 10th anniversary of the award. To celebrate this significant event, the Prince Mahidol Award Conference was held in Bangkok in January each year, and presided over by His Majesty the King of Thailand.

The Prince Mahidol Award Conference is to bring together leading public health leaders and stakeholders from around the world to discuss high priority global health issues, summarise findings and propose concrete solutions and recommendations. It aims to be an international forum that global health institutes, both public and private, can own and see as the advocacy for the advocacy and seeking of international advice on important global health issues. Specific objectives of each year’s conference are discussed among key stakeholders and co-hosts of the conference.

Conference partners include ministers, senior government officials, intergovernmental and international agency partners, global health initiatives, health policy and health systems researchers and advocates, and high-level stakeholders from developing and developed countries.

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