



# TAEI

Quarterly Newsletter : October-December'25- 2<sup>nd</sup> Edition



## Background

Reducing deaths due to Road Traffic Injuries in the country by half before 2030 is the key target of the Sustainable Development Goal (SDG target 3.6) set in 2015.

The Tamil Nadu Vision 2023 embarks on reducing deaths related to other healthcare emergencies in the State.

Hence, the Government of Tamil Nadu rolled out an Emergency Care Service Delivery System in the State as the Tamil Nadu Accident and Emergency Care Initiative (TAEI) since 22.06.2017

(G.O. (Ms.) No. 231, Health & Family Welfare Department, dated 22.06.2017).

TAEI aims to ensure timely, protocol-based emergency care by strengthening emergency departments and pre-hospital services. The initiative focuses on rapid triage, early definitive management, and seamless referral to reduce preventable deaths and disabilities across the State.

# From Commissioner's Desk



Tamil Nadu has earned nationwide recognition for its robust and responsive emergency care network, established under the Tamil Nadu Accident and Emergency Care Initiative (TAEI) of the Government. Through significant investments in infrastructure development, advanced equipment provisioning, and human resource strengthening, the traditional casualty units in Government Hospitals (GHs) and Medical College Hospitals (MCHs) have been transformed into streamlined Emergency Rooms (ERs) and Emergency Departments (EDs), respectively.

As of now, 113 TAEI centers are operational across the State, delivering high-quality, timely care to patients in critical need. These centers have collectively managed a wide range of emergencies, including trauma, burns, myocardial infarction (MI), stroke, poisoning, and PREM (Paediatric Resuscitation and Emergency Medicine) cases.

In alignment with the Government Order, GO (Ms) No. 35 HFW(EAP.II/I) dated 10.02.2025, the TAEI Commissionerate at the State level has been reconstituted under the leadership of the Project Director, Tamil Nadu Health Systems Project (TNHSP), as the Commissioner of TAEI. This strategic restructuring aims to further strengthen the delivery and oversight of emergency care services throughout Tamil Nadu.

The Commissionerate is committed to real-time monitoring, continuous quality improvement, and comprehensive capacity building. Over the past month, significant progress has been made in conducting targeted training programs to upskill healthcare professionals involved in emergency care.

Our mission now moves beyond infrastructure and access – we are focused on ensuring clinical excellence, improved patient outcomes, and enhanced patient experience. This evolving approach marks a transformative shift: from emergency departments as reactive units to proactive, efficient, and patient-centered systems. I urge each one of you – from ER staff to hospital administrators – to keep the momentum going. Continue to uphold the highest standards of care, report challenges promptly, and participate actively in trainings and audits. Your work is saving lives, and your commitment is the foundation on which this system stands.

Dr. S. Vineeth, I.A.S  
Commissioner, TAEI  
Project Director, TNHSP  
Government of Tamil Nadu

# Monthly Activities

**Every 2nd Tue-Wed: 2 days Refresher training for Doctors & Nurses**

**Every 3rd Wed : 2 days Refresher training for Doctors & Nurses**

**Every 3rd Fri : TAEI Grand Rounds for critical cae review (Virutal)**

**Every 4th Thursday : ½ day First Responder Training programme on BLS and Early Trauma Management**

**One Day PREM Training: At Regional Medical College Hospital Level**

**2 Days PREM Workshop: For doctors and nurses from district hospitals and taluk hospitals**

## Basic Life Support (BLS) & Early Trauma Management Training

The Basic Life Support (BLS) and Early Trauma Management Training Programme was conducted across 36 Medical College Hospitals, held every fourth Thursday of the month, with over 1,000 participants trained.

The programme focused on the importance of early intervention in witnessed sudden collapse and highlighted how high-quality first aid and CPR significantly improve survival rates. Sessions were interactive, with participants actively engaging and seeking clarifications on BLS protocols



Participants received hands-on training in adult and pediatric BLS, including foreign body airway obstruction management, using mannequins. Key concepts related to Acute Myocardial Infarction (MI) and Acute Cerebrovascular Accident (CVA) were also covered, with special emphasis on the critical window period in stroke management.

By empowering teachers, police personnel, fire services, NGO staff, and forest officers, the initiative strengthens community preparedness and moves us closer to a first-responder-ready society where every second counts.



## World Trauma Day 2025 - CPR Awareness Week



World Trauma Day is observed annually on October 17 to highlight the global impact of trauma, promote prevention strategies, and advocate for improved emergency care systems. World Trauma Day was established in 2011 by the Trauma Association of India and is observed on October 17 each year. The motivation behind this initiative stemmed from the alarming statistics related to trauma injuries and fatalities. In 2025, this day serves as a critical reminder of how injuries and traumatic events affect millions worldwide, often leading to preventable deaths and long-term disabilities. It encourages communities, healthcare professionals, and policymakers to collaborate in reducing trauma's burden.

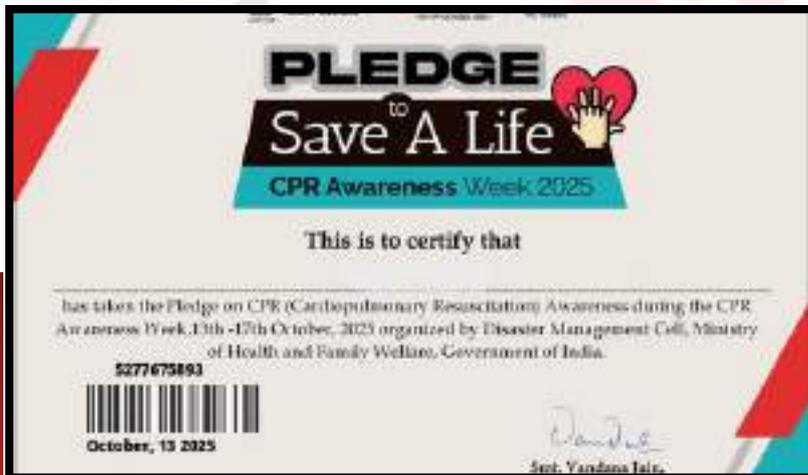
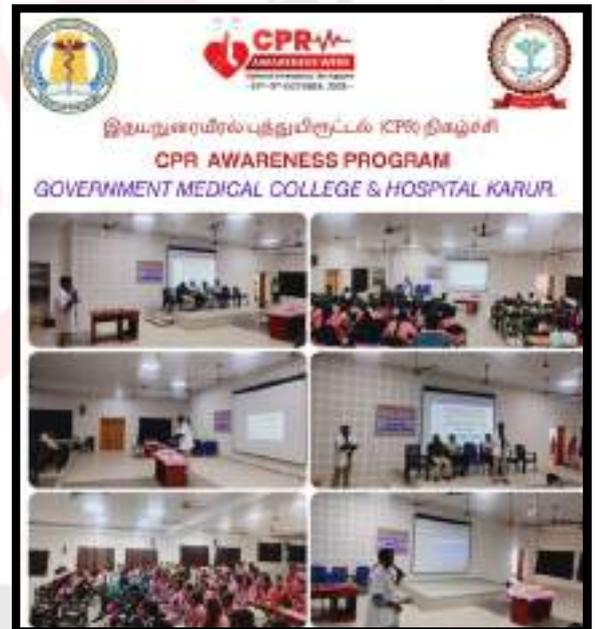
# Activities carried out by Institutions across Tamil Nadu

## CPR Awareness Week – Program Highlights & Community Engagement

- The CPR Awareness Week was observed with great enthusiasm, marking a significant step toward building a community that is informed, empowered, and prepared to save lives. The program emphasized the importance of Cardiopulmonary Resuscitation (CPR) as a critical life-saving technique and encouraged widespread public participation.

## Inaugural Session

- The event commenced with a brief yet insightful introduction on the importance of CPR, focusing on its vital role in emergency situations and the need for community-wide awareness. Participants collectively took the CPR Awareness Oath, reaffirming their commitment to act responsibly during medical emergencies.



## Training & Skill Development

- A comprehensive theory session on Basic Life Support (BLS) was conducted by certified trainers, covering essential concepts, emergency response steps, and the science behind CPR.

## Following the theory session, participants engaged in:

- Live demonstration of CPR techniques
- Hands-on training using mannequins
- Step-by-step practice of chest compressions and rescue breaths
- These sessions ensured that participants not only learned the technique but also gained the confidence to perform CPR correctly during real-life emergencies.

## CPR Awareness Skit

- Nursing students from various institutions performed an engaging CPR Awareness Skit, highlighting the importance of timely action, bystander involvement, and best practices during cardiac emergencies. The performance received an overwhelming response from the audience for its clarity and impact.



## Awareness Skit Play

## Quiz Activities

## CPR - Training Video

A series of innovative and interactive activities were organized to reach diverse audiences and reinforce the message of prompt bystander intervention:

### Mass CPR Demonstration

A large-scale demonstration showcased the CPR technique, helping the public visualize and understand the correct procedure.

### Street Play

A captivating street play conveyed real-life scenarios, emphasizing the need for quick thinking and immediate CPR administration.

### Poster Competition

Participants created thoughtful and informative posters, spreading awareness through creative expression.

### Quiz Competition

An engaging quiz tested participants' understanding of CPR and BLS concepts, creating a healthy competitive spirit.

# Launch of TAEI Registry 2.0

In a major step towards strengthening its emergency healthcare ecosystem, the **Tamil Nadu Government** on **08.11.25** launched the upgraded **Tamil Nadu Accident and Emergency Care Initiative (TAEI) Registry 2.0** – a comprehensive digital platform designed to streamline and elevate the quality of emergency medical services across the State. The upgraded registry, accessible through both web and mobile applications, will record live patient data from the 108 ambulance network and hospital emergency departments. This will enable data-driven analysis, improve clinical decision-making, and help enhance patient outcomes,



First launched in 2017, the TAEI has been a pioneering initiative in India's public health system. It has transformed the state's emergency response network by converting traditional hospital casualty wards into modern emergency departments equipped with advanced infrastructure, sophisticated medical equipment, and specially trained personnel.

As of now, **113 TAEI centres are functioning across Tamil Nadu** – including **36 medical college hospitals, five attached institutions, 31 district headquarters hospitals, and 41 sub-district hospitals**. Many of these are strategically located along national and state highways to ensure immediate medical attention for accident victims and other critical patients. The upgraded TAEI Registry 2.0 will not only improve the speed and accuracy of emergency care but also provide the government with a valuable database for research, monitoring, and policy planning. With real-time analytics and digital integration, we can ensure that every patient receives the right care at the right time

The launch of TAEI 2.0 marks a significant milestone in Tamil Nadu's continuing effort to build a robust, technology-driven healthcare system capable of handling emergencies efficiently and equitably across both urban and rural areas.

# A Landmark Milestone in the Growth of Emergency Medicine in Tamil Nadu

The development of Emergency Medicine (EM) in Tamil Nadu is the result of sustained policy support and institutional efforts over the past decade. The initiative commenced in 2017 under the Tamil Nadu Accident and Emergency Initiative (TAEI) with the establishment of Emergency Departments across the state. In 2021, these departments were formally integrated into the academic framework as Emergency Medicine Departments (EMDs) in Medical College Hospitals under the Directorate of Medical Education, despite the operational challenges posed by the COVID-19 pandemic.



With the academic structuring of Emergency Departments into Emergency Medicine Departments (EMDs) across Medical College Hospitals under TNHSRP in 2021, even amidst the challenges of the COVID-19 pandemic, the specialty gained strong academic foundations. This momentum led to the successful induction of 84 MD Emergency Medicine postgraduate seats in 2022, marking the beginning of formal EM training in the state.

In a significant achievement, 84 postgraduate candidates appeared and all 84 passed (100% pass rate), reflecting the strength and quality of the training ecosystem. Today, the first batch of Emergency Medicine service candidates in Tamil Nadu Medical Services (TNMS) – 38 graduates (32 MD and 6 DNB) – have been smoothly accommodated and commissioned into academic Emergency Medicine faculty positions across EMDs under the Directorate of Medical Education.

This milestone has been made possible through the continued guidance and support of the Mission Director, NHM; Project Director, TNHSP/ the Commissioner of Trauma Care (TAEI); the Directorate of Medical Education; senior IAS officers; Health Secretaries; Deans of Medical College Hospitals; and the Hon'ble Ministers of Health, Government of Tamil Nadu, over nearly a decade.

The Emergency Medicine fraternity of Tamil Nadu expresses its deep gratitude to all stakeholders and proudly acknowledges the courage and commitment of the first batch of EM specialists, who chose this pioneering specialty and have now become its permanent pillars.

# World Stroke Day 2025 – Awareness Programme

**World Stroke Day** is observed annually on **29th October** to create awareness on stroke prevention, early recognition, timely treatment, and recovery. In observance of World Stroke Day 2025, the Institute of Neurology, Rajiv Gandhi Government General Hospital (RGGGH) organised an awareness programme focusing on stroke prevention, treatment, and rehabilitation.

The programme commenced with an awareness rally from the Dean Pillar to Tower 1, which was flagged off by the Tamil Nadu Health System Project Director, Dr. Vineeth, IAS. The rally witnessed active participation from the Dean Dr. K. Shantaramani, Director of Neurology Dr. K. Mugundhan, the Medical Superintendent, senior professors, assistant professors, postgraduate students, and students from the College of Nursing. Participants carried placards conveying key messages on stroke awareness. **The theme for World Stroke Day 2025, “Every Minute Counts,”** was prominently highlighted.



A keynote address was delivered by the Director of Neurology, Prof. Dr. K. Mugundhan, who highlighted the 24×7 availability of a comprehensive stroke care team and the presence of an exclusive Neuro Cath Lab with interventional neurology services at RGGGH. Prof. Balasubramanian, former Director of Neurology, also participated and delivered a special address. The TNHSP Project Director, Dr. Vineeth, IAS, appreciated the dedicated services rendered by the neurology team.

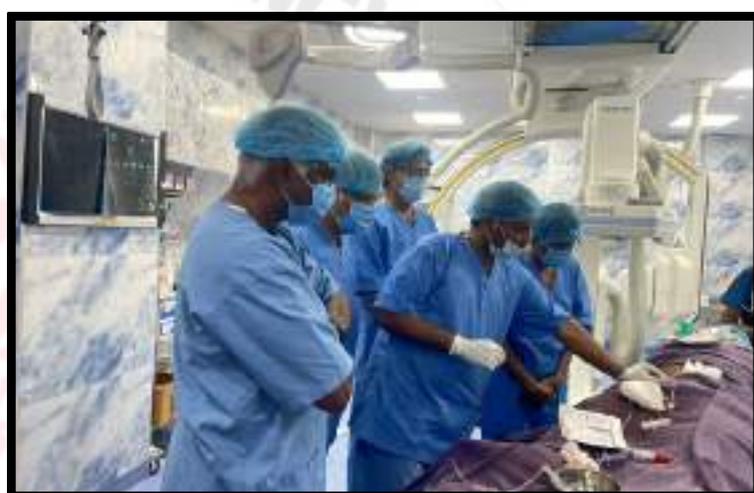
Patient success stories involving treatment with intravenous thrombolysis and mechanical thrombectomy were shared, followed by a two-way interactive session between stroke experts, patients, and their attendants, enhancing public understanding of stroke care and recovery.

The programme concluded with a pledge to raise awareness on stroke risk factors and early warning symptoms, with special emphasis on the golden window period of four-and-a-half hours for stroke thrombolysis, reinforcing the importance of early hospital arrival. Similar World Stroke Day awareness programmes were also conducted across other Government Medical College Hospitals, ensuring wider outreach and uniform dissemination of stroke awareness messages across the state.

# Stroke Training

The SCRIPT (Stroke) Training Programme is envisaged as a focused capacity-building initiative for Neurologists, Neurosurgeons, and Radiologists, with structured training in Mechanical Thrombectomy and Neuro-interventional procedures, aimed at strengthening Comprehensive Stroke Care Services across the State.

The programme places emphasis on the provision of timely, protocol-based stroke care, including rapid evaluation, administration of plasminogen activator, and advanced endovascular interventions such as Mechanical Thrombectomy. By standardizing clinical pathways and improving procedural readiness, the initiative seeks to significantly reduce stroke-related morbidity and mortality.



At present, the State is equipped with Biplane Cath Labs across select Government hospitals. Optimal utilization of these advanced facilities is critical to enhancing comprehensive stroke care delivery. To achieve this, it is proposed to conduct periodic hands-on training programmes in **Mechanical Thrombectomy procedures at Kalaignar Centenary Super Speciality Hospital (KCSSH), Guindy**. These sessions will be designed for Senior Neurologists, Neurosurgeons, and Radiologists, along with Cath Lab Technicians and Staff Nurses, ensuring a multidisciplinary approach to stroke intervention.

The training programme aims to strengthen technical skills, procedural expertise, and team coordination among healthcare professionals working in Cath Lab-equipped Government hospitals. Through supervised hands-on exposure, case-based learning, and protocol familiarization, participants will be better equipped to manage acute ischemic stroke cases efficiently.

This structured capacity-building initiative is expected to improve timely access to advanced stroke interventions, ensure effective utilization of existing infrastructure, and ultimately contribute to improved patient outcomes and equitable stroke care delivery across Tamil Nadu.

# TAEI Highlights: Visits, Reviews & National Participation

As part of its continued efforts to strengthen emergency care systems and promote institutional learning, TAEI has actively participated in and hosted several high-level meetings, workshops, and knowledge-exchange visits across the State and at the national level.

Officials from the Central National Health Mission undertook a CRM visit to Salem, during which TAEI's initiatives and operational frameworks were reviewed.

In another significant engagement, the Hon'ble Supreme Court Committee Judge, Mr. Abhay Manohar Sapre, along with the Road Safety and Road Transport Commissioner, Mrs. Gajalakshmi, I.A.S., and Mr. Abhishek, I.G., Traffic & Road Safety, visited the TAEI Centre at Rajiv Gandhi Government General Hospital (RGGGH) and the Emergency Response Centre (ERC) at the DMS Building to understand the scope, functioning, and impact of TAEI's emergency care interventions.



TAEI also facilitated several capacity-building and innovation-driven engagements, including the conduct of a PREM workshop at the Institute of Child Health (ICH), Chennai, aimed at strengthening patient-reported experience measures and quality improvement in emergency care services. In addition, a demonstration of Augmented Virtual Reality (AVR)-based CPR training was conducted at Omandurar Medical College Hospital, Chennai, showcasing the use of advanced immersive technology to enhance hands-on learning, skill retention, and competency-based training among healthcare professionals. These initiatives underscore TAEI's commitment to integrating innovative technologies and evidence-based training approaches to continuously improve emergency medical education and patient outcomes.



# TAEI Highlights: Visits, Reviews & National Participation

Further strengthening inter-state and inter-institutional collaboration, a **delegation from Sikkim visited the TAEI Commissionerate** to study the implementation and best practices of the TAEI model in Tamil Nadu. Additionally, the **Special Secretary, Health & Family Welfare Department, Government of Himachal Pradesh**, visited TAEI to gain insights into its emergency care framework and operational strategies.



At the state level, the TAEI Commissioner, along with the team, visited **Vellore Medical College Hospital and Kilpauk Medical College & Hospital, Chennai**, to review the functioning of emergency care services and assess on-ground implementation of TAEI protocols. The visits included detailed interactions with hospital administrators, emergency medicine specialists, and clinical teams to evaluate patient flow, response timelines, and coordination across departments. Discussions focused on identifying operational gaps, reinforcing standard treatment protocols, and strengthening service delivery mechanisms to ensure timely, efficient, and high-quality emergency care across tertiary care institutions.

At the national level, the TAEI team represented the State at the **National Review Meeting (NPPMT & BI)** held at **AIIMS, New Delhi, on 19.12.2025**, contributing to policy-level discussions and sharing experiences from Tamil Nadu's emergency care ecosystem. The team presented key insights on the implementation of emergency care initiatives, best practices, and operational learnings from the State. The participation also provided an opportunity to engage with national stakeholders, exchange perspectives with other States, and align Tamil Nadu's emergency care strategies with evolving national priorities.



Collectively, these engagements underscore TAEI's growing recognition at state and national forums and reaffirm its commitment to innovation, collaboration, and excellence in emergency care delivery.

# சிகிச்சையின் தரத்தை மேம்படுத்த விபத்து மற்றும் அவசர சிகிச்சை செயலி அமைச்சர் மாசுப்பிரமணியன் தொடங்கி வைத்தார்

1 Min Read

viduthalai

Last updated: November 9, 2025 3:57 pm



# TAEI in the Spotlight

கோடியில் ஒருவருக்கு வரும் பாதிப்பு:

## அரிய வகை இதய நோய் பாதித்த பெண்ணுக்கு அதிநவீன அறுவை சிகிச்சை

தமிழகத்தில் முதன் முறையாக நடந்தது

மதுரை, நவ.9 - கோடியில் ஒருவருக்கு வரும் அரிய வகை இதய நோயால் பாதிக்கப்பட்ட பெண்ணுக்கு, மதுரை அரசு ஆஸ்பத்திரியில் அதிநவீன அறுவை சிகிச்சை செய்து டாக்டர் கள் கவியாற்றினர்.

### அரிய வகை இதய நோய்

மதுரை மாவட்டத்தை சேர்ந்தவர் பாண்டமங்கலம் (வயது 40). இவர், கடுமையான நெஞ்சுவலி மற்றும் மூச்சு விடுவதற்கு சிரமமான நிலையில், கடந்த மாதம் 5-ந்தேதி மதுரை அரசு ஆஸ்பத்திரியில் இதய நெஞ்சு அறுவை சிகிச்சை துறையில் உள்நேர பாலிபாக அறுவைசிகிச்சை செய்தபோது, அவருக்கு கோடியில் ஒருவருக்கு வரக்கூடிய அரிய வகை பிறவி இதய நோய் (அல்காபா) பாதிப்பு இருந்தது தெரியவந்தது.

இதனை தொடர்ந்து அவருக்கு கடந்த 29-ந்தேதி

அறுவை சிகிச்சை செய்யப்பட்டது தற்போது அவர் நலம் உடல்நலத்துடன் இருக்கிறார். அதிநவீன அறுவை சிகிச்சையை மேற்கொண்ட இது நெஞ்சு அறுவை சிகிச்சை துறை தலைவர் அமிர்தராஜ், டாக்டர்கள் முத்துவிஜயன், கார்த்திகேயன், இதயவியல் துறை தலைவர் செல்வராணி, டாக்டர் சரவணன், மயக்கமிடும் துறை தலைவர் கல்யாண சுந்தரம், டாக்டர் சண்முக சுந்தரம் உள்ளிட்ட மருத்துவ குழுவினரை, அரசு ஆஸ்பத்திரி மின் அருள்சுந்தர்பிரஷ்டு மார் பாராட்டினார்.

இதுகுறித்து அவர்கள் நிருபர் கனிடம் கூறினார்:-

### 3 மணி நேர அறுவை சிகிச்சை

மதுரையை சேர்ந்த பெண் ணுக்கு இதயத்திற்கு செல்லும் ரத்த ஞாலியில் பிரச்சினை இருந்தது இதனை அகற்றுவதற்காக செய்து பார்த்ததில், அரிய வகை பிறவி இதய நோய் பாதிப்பு இருந்தது கண்டறி டிக்கப்பட்டது. பொதுமக்கள் இந்த பாதிப்பு

உள்ளவர்கள் 1 வருடத கடப்பிடுமிகவும் சிரமம் ஆனால், இந்த பெண் 81 வயது வரை இன்ன, சின்ன தொந்தரவுகளை பொறுத்து கொண்டு தன்னுடைய அன்றாட பணிகளை செவ்வது வந்துள்ளார். அவருக்கு சுமார் 3 மணி நேரம் இந்த அறுவை சிகிச்சை செய்யப்பட்டது. தற்போது அவர் எந்தவித பக்க விளைவும் இன்றி நலமும் இருக்கிறார். ஒரே நாளில் அவர் மிகச்சாற்று செய்யப்பட, கண்ணார் இந்த அறுவை சிகிச்சை மாறது.

முதல் அமைச்சர் வீரவாண மருத்துவ கார்ப்பீட்டு திட்டத்தின் கீழ் இலவசமாக செய்யப்பட்டது. தனியார் ஆஸ்பத்திரியில் இந்த சிகிச்சையை மேற்கொள்ள ஒரு மில்லிணந்த அதிநவீன மருத்துவ கட்டிடமேற்புணுடல் டுக் கட்சம் வரை செல்லும் தமிழகத்தில் முதன்முறையாக சிகிச்சை நிறைந்த அறுவை சிகிச்சை, மதுரையில் செய் ம்ப்பட்டுள்ளது என்பது.

# தினகர்

தமிழகம்

பத்திரிகையாளர்களுக்கான சிறப்பு மருத்துவ முகாம் அமைச்சர்கள் மு.பெ.சாமிநாதன், மா.சுப்பிரமணியன், பி.கே.சேகர்பாபு ஆகியோர் தொடங்கி வைத்தனர்: குடும்பத்துடன் பங்கேற்று உடல் பரிசோதனை செய்தனர்

NOV 09, 2025



# GRH docs perform rare heart surgery on woman

EXPRESS NEWS SERVICE @ Madurai

GOVERNMENT Rajaji Hospital (GRH) doctors have performed a rare and complex cardiac surgery on a 40-year-old woman with ALCAPA – a congenital defect in which the left coronary artery originates from the pulmonary artery instead of the aorta, a condition usually detected in infancy and rarely among adults.

GRH Dean L Arul Sundaresh Kumar said the patient, from Sholavandan, was admitted on October 3 with severe chest pain and breathlessness. "After preliminary tests and evaluation, she was diagnosed with the ALCAPA," he said. Specialists from cardiology and anaesthesiology performed the surgery for three hours at the Hybrid Operation Theatre (OT) on October 29. "Immediately after the surgery, we conducted a coronary angiogram on the table to detect the bypassed vessel. The patient is expected to be discharged in a few days," he added.

Cardiothoracic Surgeon P



GRH dean Dr L Arul Sundaresh Kumar along with the patient. | express

Amirtharaj said most patients with ALCAPA do not survive into adulthood without corrective surgery. "This is the first time such a surgery has been carried out for a person above 40 years of age at a government medical facility in Tamil Nadu. The success was possible due to the Hybrid OT," he said. The facility integrates advanced imaging systems with a conventional operating theatre, allowing both open and minimally invasive procedures without shifting the patient.

Doctors said the procedure, carried out for free under the CMCHIS, would have cost about ₹5 lakh at a private hospital. Around 70 complex surgeries have been completed so far at the Hybrid OT, they added.

# TAEI in the Spotlight

## பாம்புக்கடி..அரசு மருத்துவர்களுக்கு சிறுவனின் தாய் கண்ணீர் மல்க



**அரசு மருத்துவர்களுக்கு சிறுவனின் தாய் கண்ணீர் மல்க நன்றி” உயிர் பிழைப்பது அரிது என்ற ஆபத்தான நிலையில் இருந்த மகனை காப்பாற்றிய அரசு மருத்துவர்களுக்கு தாய் செல்வி கண்ணீர் மல்க நன்றி**

குணசேகரன் செந்திரன்

**JUST NOW**

**கட்டு விரியன் கடித்த சிறுவனை காப்பாற்றிய மருத்துவர்கள்! ஈரோடு: கொடிய விஷமுள்ள கட்டு விரியன் பாம்பு கடித்தும் எந்த அறிகுறியும் இல்லாமல், சுயநினைவின்றி மருத்துவமனையில் சேர்க்கப்பட்ட 1 வயது சிறுவனுக்கு சிகிச்சை அளித்து உயிரைக் காப்பாற்றிய அரசு மருத்துவமனை மருத்துவர்கள்! பாம்பு விஷமுறிவு மருந்து 20 பாட்டில்கள் (20 Vial - Anti Venom) செலுத்தி தீவிர சிகிச்சையளித்ததில் 72 மணி நேரத்திற்குப் பின் சிறுவனுக்கு நினைவு திரும்பியது.**

**பாம்புக்கடி.. மருத்துவர்கள் அறிவுறுத்தல்**

**பாம்பு கடித்தாலோ, கடித்திருக்கலாம் என்ற சந்தேகம் ஏற்பட்டாலோ உடனடியாக அருகில் உள்ள அரசு மருத்துவமனை செல்ல வேண்டும்**

குணசேகரன் செந்திரன்

### அரிய வகை இருதய நோயால் பாதிக்க பெண்ணுக்கு மதுரை அரசு மருத்துவமனையில் நவீன அறுவைச் சிகிச்சை

மதுரை, தலைநகர் அரிய வகை இருதய நோயால் பாதிக்க பெண்ணுக்கு அறிவுறுத்தல் மதுரை அரசு மருத்துவமனையில் நவீன அறுவைச் சிகிச்சை மேற்கொண்டது.

இந்த அறுவைச் சிகிச்சையை மேற்கொண்ட நேரமாக அறுவைச் சிகிச்சைத் துறை தலைவர் அபிநவ் ராஜ் இருதயவியல் துறை தலைவர் செல்வாணி, மல்க்கிணில் துறை தலைவர் கங்காநாதன், மருத்துவர்கள் முத்துமலை, காந்தி மேல் சவணம், கங்காநாதன், கங்காநாதன், மருத்துவர்கள் குமாரன், மதுரை அரசு மருத்துவக் கல்லூரி முதல்வர்கள் ஆர். சந்திரேஷ், குமார் செல்வாணி ஆகியோர் பங்கேற்றனர்.

இந்த நிகழ்வில் இடம்பெறும் போது அறுவைச் சிகிச்சை நிறுத்தி வைக்கப்பட்டது. மேலும், இதுபோன்ற சிகிச்சை மேற்கொள்ளும் போது பாதுகாப்பு மற்றும் சிகிச்சை குறித்து மருத்துவர்கள் கவனம் செலுத்த வேண்டும் என்று குறிப்பிடப்பட்டது.

இந்த நிகழ்வில் இடம்பெறும் போது அறுவைச் சிகிச்சை நிறுத்தி வைக்கப்பட்டது. மேலும், இதுபோன்ற சிகிச்சை மேற்கொள்ளும் போது பாதுகாப்பு மற்றும் சிகிச்சை குறித்து மருத்துவர்கள் கவனம் செலுத்த வேண்டும் என்று குறிப்பிடப்பட்டது.

## Paediatric emergency care initiative in district, taluk hospitals improves child survival rates in the State

Sreeta Josephine M.  
GRIFFIN

By setting up specialised centres for paediatric emergency care, Tamil Nadu has significantly improved child survival rates in recent years. The State's Paediatric Resuscitation and Emergency Medicine (PREM) initiative has strengthened paediatric emergency care in government secondary care institutions - district head quarters hospitals and taluk hospitals - through dedicated protocols and appropriate infrastructure.

PREM is one of the pillars of the Tamil Nadu Accident and Emergency Care Initiative (TAEI).

There are 88 PREM centres across government tertiary and secondary care institutions - 41 Directorate of Medical Education and Research institutions (38 medical colleges and five allied institutions) and 75 Directorate of Medical and Rural Health Services institutions (district headquarters and taluk hospitals), said N. Vijayakumar, Deputy Director-Terrace, TAEI Co-ordinator, said Indrathani Santhaman, Project Coordinator,

### Significant strides

The Tamil Paediatric Resuscitation and Emergency Medicine Initiative of the National Health Mission, Tamil Nadu, and the Tamil Nadu Health Systems Project, has strengthened paediatric emergency care by setting in place protocols, required infrastructure, equipment, drugs, and trained staff.



### PREM's performance in Paediatric Resuscitation and Emergency Medicine

Year	Total admissions	Discharge	Admitted to higher centres	Death	Survival rate
2020 (up to August)	60,581	49,125	2,094	189	94.24
2021	52,294	48,987	2,336	180	94.26
2022	45,781	46,881	2,211	207	94.21
2023	27,421	26,889	1,373	148	94.41
2024	21,386	20,948	1,251	184	93.44

SOURCE: PREEM, TAMIL NADU ACCIDENT AND EMERGENCY CARE INITIATIVE.

Indrathani shows a steady rise in survival rates among children treated at PREM centres - from 93.44% in 2020 to 94.26% in 2024. In the current year (up to August 2025), the survival rate is 94.34%.

Admissions have also surged sharply, rising from 31,546 in 2020 to 80,907 this year.

The concept was built on a model formulated by the Institute of Child Health (ICH) and Hospital for Children in Kolkata, said Indrathani Santhaman, Project Coordinator,

Regional Collaborative Center, PREM Skills Laboratory, ICH, Madras Medical College.

### Guidelines developed

"The Paediatric Emergency Medical Course was started at ICH. We developed guidelines to treat paediatric emergencies. This included training programmes to conduct a 60-second analysis of sick children, and make independent decisions. These efforts reduced hospital mortality. The lessons learned formed the basis

for PREM guidelines, and units were launched at 28 hospitals (22 district head quarters and six sub-district headquarters hospitals) in 2017," she said.

This was projected by the National Health Mission, Tamil Nadu, as a strategy to reduce post-neonatal under-five mortality.

PREM has saved the lives of numerous children brought in critical condition.

"Earlier, it used to be a 'scoop-and-run' approach, as paediatric emergency services were unavailable

in taluk and sub-district hospitals. A large number of children were taken to these secondary care hospitals, and quickly referred to tertiary care centres. This changed in 2020, when PREM units were first established in secondary care hospitals, and later revised post-COVID. We developed two books for PREM, which include diagnosis and treatment protocols for common paediatric emergencies such as asthma, sepsis, dengue, snake bites and foreign body ingestion," Dr. Indrathani said.

### SOBs for PREM centres

A major highlight is Standard Operating Procedures (SOPs) for PREM centres.

"PREM has put in place uniform standards for handling paediatric emergencies. It has a trained team, equipment, and drugs essential for emergency resuscitation. We are able to provide immediate care during the golden hour," Dr. Vijayakumar added.

Dr. Indrathani cited a recent example. The 8th floor of Government Hospital, Santhapuram, received a two-year-old child from

Kanpetur, who suffered a left temporoparietal injury after a television fall on her head.

Doctors stabilised her, initiated treatment to reduce cerebral oedema, and performed CT brain and CT facial bones with 3D reconstruction. 20 dental lacerations and subdural and haemorrhage were established. She was intubated in anticipation of declining consciousness, and referred to an ICH in a 100 ambulance. She was treated and discharged.

"Such resuscitation at the PREM unit in a secondary care hospital, prior to referral, ensured meaningful brain injury survival. Previously, skills without resuscitation resulted in morbidity and mortality," she said.

"The brain is still in the developing stage for children. Delayed resuscitation can cause permanent damage. PREM units have reduced the burden on tertiary care units across Tamil Nadu," she added.

Hundreds of doctors and nurses are trained at the PREM skills lab established at ICH under the Tamil Nadu Innovative Initiative Fund in 2021.

**Critical care** A handy map for those facing medical emergencies like cardiac arrest and strokes will help them get prompt treatment

	Heart attack care under TAEI		Stroke care with SCRIPT under TAEI	
	Hub	Spoke	Hub	Spoke
<b>Facilities available</b>	1. CCU 2. Cath lab	CCU	1. CT scan 2. Cath lab 3. Neurosurgery	CT scan
<b>Treatment available</b>	1. Thrombolysis 2. Angiogram 3. Angioplasty	Thrombolysis	1. Thrombolysis/ Thrombectomy for thrombotic patients 2. Conservative management/ surgical management for haemorrhagic stroke patients	1. Thrombolysis for thrombotic stroke patients 2. Conservative management for haemorrhagic stroke patients
<b>Number of centres</b>	18	154	23	55

## Stroke patient recovers after being given ₹50K free injection shot at GH

EXPRESS NEWS SERVICE  
@ Tirukodi

A 42-year-old man who suffered a sudden stroke at his welding workshop was successfully treated and discharged after recovery at the Government Hospital (GH) in Sankarankovil, following timely medical intervention within the critical window period. The patient was administered an injection worth ₹50,000 free of cost under the Tamil Nadu government's stroke care scheme.

According to Joint Director of Health Services Dr Premalatha, the patient, Muppudathy, a resident of Sankarankovil, developed sudden

weakness in his left arm and leg while working at his workshop around 2.30 pm on January 19. "He was initially taken to a private hospital, where doctors diagnosed a cerebrovascular event. He was then referred to the GH," she said.

Upon arrival, the patient had complete loss of power in his left upper and lower limbs. Doctors immediately conducted a CT scan of the brain, which confirmed an ischemic stroke with hemiplegia.

"As the patient reached the hospital within the four-and-a-half-hour golden window period, doctors administered Alteplase injection, worth ₹50,000, under the state government's



As the man reached the hospital within the four-and-a-half-hour golden window period, doctors administered Alteplase injection, worth ₹50,000, under the SCRIPT protocol

Dr Premalatha

SCRIPT (Stroke Care and Rapid Intervention with Plasminogen Activator and Thrombectomy) protocol," Dr Premalatha said.

By the second day of treatment, the patient's health showed significant improvement, with increased limb power and the ability to stand.

With continued medical care and physiotherapy, he gradually regained mobility and was eventually able to walk independently.



# Case Studies

## A milestone in paediatric cardiac care at GRH

On 20 November 2025, a four-year-old child admitted to Government Rajaji Hospital, Madurai was diagnosed with multiple congenital heart defects—ASD, PDA, and severe pulmonary stenosis. In a significant first for the institution, the multidisciplinary team successfully corrected all three defects during the same hospital admission through ASD device closure, PDA coil closure, and balloon pulmonary valvotomy. The child is currently stable and recovering well, reflecting the growing interventional capabilities of the hospital. This achievement was made possible through the coordinated efforts of the clinical faculty, paramedical staff, and the Department of Anaesthesia, whose support was crucial to the successful outcome.

**Breaking age barriers in cardiac care—delivering life-saving interventions to the youngest hearts at GRH, Madurai.**

On 03 December 2025, the Department of Cardiology at Government Rajaji Hospital, Madurai, successfully performed a Balloon Mitral Valvotomy on a 13-year-old patient diagnosed with severe rheumatic mitral stenosis. This intervention represents the youngest such case managed at the institution to date, marking an important milestone in the hospital's cardiac care services. The procedure was carried out successfully by a coordinated multidisciplinary team, highlighting the department's capability to manage complex rheumatic heart disease even in paediatric and adolescent patients. The successful outcome reflects continued strengthening of interventional cardiology services at GRH, Madurai.

## A major milestone in emergency orthopaedic care was achieved at Government Medical College Hospital, Tiruppur.

A 39-year-old male involved in a road traffic accident was brought to the hospital and diagnosed with a complex acetabular fracture with associated hip dislocation—a time-critical orthopaedic emergency requiring prompt intervention.

For the first time at Tiruppur Medical College Hospital, the Orthopaedic Department, under the TAEI / NHM / IKT initiative, successfully performed pelvi-acetabular fixation. Remarkably, the procedure was completed within six hours of admission, highlighting the effectiveness of rapid emergency response, multidisciplinary coordination, and surgical preparedness.

This achievement was made possible through the collective efforts of multiple departments. The team extends sincere gratitude to the Dean for her valuable guidance, and to the Departments of Anaesthesia, Emergency Medicine, Radiology, and the Central Laboratory for their seamless coordination and support, which were instrumental in ensuring timely and successful patient care.

# Milestones and Advancements in Emergency Care

## 👶 Paediatric Resuscitation & Emergency Medicine (PREM)

### Saving Young Lives Through Structured Care

**Pioneer: Dr. Peter Safar** – pioneer of modern resuscitation science.

Clinical experience in the mid-20th century revealed that children in emergency situations often succumbed to airway and breathing compromise rather than primary cardiac causes. This understanding led **Dr. Peter Safar to formalize the ABC (Airway–Breathing–Circulation)** approach, which became the cornerstone of paediatric resuscitation. Over time, this evolved into globally accepted Paediatric Advanced Life Support (PALS) protocols, dramatically improving outcomes in critically ill children.

**Recent Trends: Task-shifting and system readiness: a narrative review of strategies for pediatric emergency care in low-resource settings**

## 🔥 Burn Care

### From Injury Management to Specialized Healing

**Pioneer: Sir Archibald McIndoe** – regarded as the father of modern burn care.

During World War II, the increasing survival of aircrew with severe burns prompted a deeper understanding of burn physiology and recovery. Sir Archibald McIndoe demonstrated that early intervention, structured wound care, and rehabilitation could significantly restore both life and function. His work laid the foundation for dedicated burn units, transforming burn management into a specialized and multidisciplinary discipline.

**Recent Trends: New generation of skin substitutes for severe burns**

**Researchers in Australia are developing multifunctional dermal substitutes that not only replace lost skin but resist infection and promote tissue regeneration – addressing a key complication in severe burns.**

## 🚑 Trauma

### The Birth of Time-Critical Emergency Systems

**Pioneer: Dr. R. Adams Cowley** – father of modern trauma systems.

In the 1960s, outcome analyses of trauma patients revealed a clear pattern: survival improved markedly when definitive care was delivered rapidly. Dr. R. Adams Cowley introduced the concept of the “Golden Hour,” emphasizing the importance of early intervention. This insight led to the development of organized trauma systems, integrating pre-hospital services, emergency departments, and trauma centers into a unified lifesaving network.

**Recent Trends: Recent Advances in Prehospital and In-Hospital Management of Patients with Severe Trauma**

# Milestones and Advancements in Emergency Care

## ♥ STEMI Care (Acute Myocardial Infarction)

### Restoring Blood Flow, Saving Heart Muscle

**Pioneer: Dr. Eugene Braunwald (cardiology science) & Dr. Andreas Grüntzig (coronary angioplasty)**

Scientific advances demonstrated that myocardial damage during heart attacks progressed with time. Pioneering work by Dr. Eugene Braunwald clarified the biology of myocardial injury, while Dr. Andreas Grüntzig revolutionized treatment through coronary angioplasty. These breakthroughs established the principle of early reperfusion, leading to modern STEMI care pathways centered on speed, coordination, and precision.

**Recent Trends: From Luck to Protocol: India's Emergency Care Gets Structure and the Golden Hour ..**

**Read more at: <https://health.economictimes.indiatimes.com/news/industry/transforming-emergency-care-in-india-embracing-technology-and-protocols/122251368>**

## 🧠 Stroke Care

### From Diagnosis to Rapid Reperfusion

**Pioneer: Dr. C. Miller Fisher – father of modern stroke neurology.**

Stroke was once viewed as an untreatable neurological event. Through meticulous clinical research, Dr. C. Miller Fisher identified stroke as a vascular condition with distinct mechanisms. This understanding paved the way for time-bound interventions, culminating in thrombolysis and mechanical thrombectomy. Today's stroke systems reflect this evolution, prioritizing early recognition and rapid restoration of cerebral blood flow.

**Recent Trends: [Affordable Supernova stent breakthrough from India boosts access to mechanical thrombectomy technology](#)**

## ☠️ Poisoning & Toxicology

### Understanding Dose, Preventing Harm

**Pioneer: Paracelsus (1493–1541) – father of toxicology.**

As early as the 16th century, Paracelsus established a foundational truth of medicine: "The dose makes the poison." This principle transformed the understanding of toxins from mystery to science. Over centuries, systematic observation and research built modern toxicology, enabling structured poisoning management, antidote development, and safer public health practices.

**Recent Trends: [Intravenous Lipid Emulsion cuts fatality in Celphos \(pesticide\) poisoning by 40 % – a major potential lifesaving intervention for one of the deadliest toxin exposures in rural areas.](#)**

# Editorial Team

Dr. M. Vijayakumar, Deputy Director - Team Lead, TAEI, TNHSP

Ms Jeya Lydia, Consultant - Trauma & PREM Pillar

Dr. Divya, Consultant - Burns Pillar

Mr Ashok, Consultant - Stroke/ SCRIPT pillar

Ms Sanghavi, Consultant - STEMI/ MI & Poison Pillar

Mr Kumaresh, Data Analyst - TNHSP

Mr Prabhakar, Statistician, TAEI

Please send your feedbacks & articles to [traumatnhsp@gmail.com](mailto:traumatnhsp@gmail.com)

## Social Handles



Instagram: <https://www.instagram.com/tnhealthconnect?igsh=ZXFnZXZleW5vbzZm> :



Facebook: <https://www.facebook.com/TNHealthConnect/posts/-important-update-good-evening-allthe-deadline-for-sending-orp-broad-themes-has-/122152767236593075/>



Twitter: <https://x.com/TNHealthConnect/status/1922709897537327496>



YouTube: <https://youtube.com/@tnhealthconnect?si=icACnoMHRUp-5Ai->