

Introduction:

We are located in Garo Hills. Garo Hills is part of the State of Meghalaya. It is mainly inhabited by the people of the Garo Tribe. In terms of Medical Care it is one the most backward parts of the North East.

The major challenges are:

- Poor connectivity and distance(Some areas are completely inaccessible during the monsoons)
- Poorly operated Primary Health Centres
- Lack of medical professionals.

With the bulk of medical professionals seeking to be located in towns the major gap in the health care has been in the rural areas.

Need for Critical Care in the Rural:

The major population in any community is rural. The lack of health literacy, distance and transportation, social stigma and belief in traditional medication, patients are very often brought acritically ill. This has created an unprecedented demand for Critical Care Services. With little to no basic facilities at the Primary Health Centres the critically ill patients often succumb or are referred.

Experience of Critical Care in a rural setting:

The need to support the Medical work by providing cost effective and high quality health care in rural Garo Hills has been the primary goal of Garo Hills Adventist Mission Nursing Home. The Nursing Home is located in a small village called Jengjal, West Garo Hills A junction with accessible roads to all parts of Garo Hills.

It has been over 15 months since the Nursing Home has been established and we have been able to see how a basic knowledge in Critical Care can be lifesaving and very rewarding.

The team consists of two Paediatricians, a Gynaecologist, a Dentist supported with 4 nurses. The Nursing Home is a 10 bedded facility. The ER is a 5 bedded set up which has basic facilities eg, Cardiac Monitor, ECG machine and oxygen.

With being the only institution outside the main town providing specialised care in

Paediatrics and Obstetrics and Gynaecology, a good number of patients present critically ill.

The most common critically illness cases are Acute Myocardial Infarction, Hypertensive Emergencies, Septic Shock, Status Asthmaticus, Anaphylactic Shock , foreign body in the ear, Snake Bites, Insect Bites, Renal Colic, croups, Status Epilepticus and in OBGYN Eclampsia.

It has been our experience that with a basically equipped ER, a standard emergency management protocol and a trained medical team many of the most commonly encountered emergencies can be treated well even at a rural Health care centre.

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