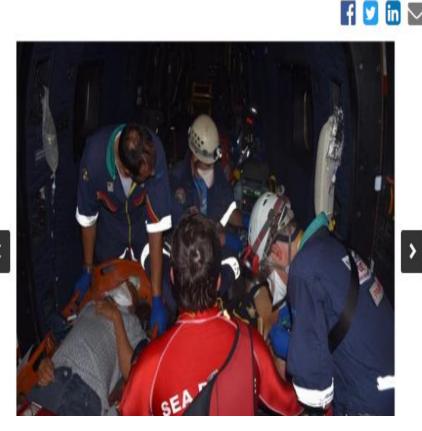
PICS: Two sailors die of suspected malaria after sea rescue

DAILY NEWS / 21 SEPTEMBER 2017, 10:14AM / THOBEKA NGEMA



TradeWinds

The Global Shipping News Source

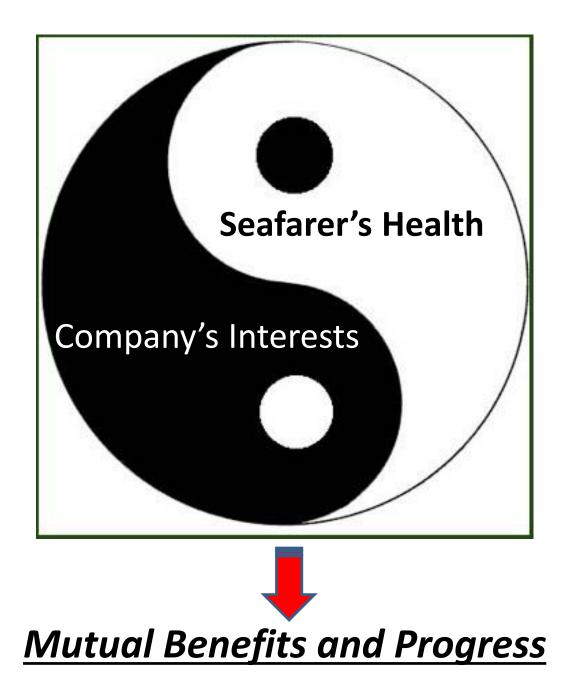
LATEST JOBS Commercial Vessel Operator, London

d'AMLCO

NYPD airlifts seafarer from d'Amico MR

New York Police Department called into action after crewman loses consciousness.

Diagnosed / Managed / Prevented





Case study 1: On Board Medical Advice and Management: Deviation Avoidance

Medical Issue: Abdominal pain – Appendectomy

Medical Information Received:

Crew member experienced sharp pain in the right abdomen , fever and fatigue and captain contacted SHIPMEDCARE.

SHIPMEDCARE Action:

The patient was diagnosed with possible appendicitis (surgeon's consultation), medical treatment (antibiotics) and daily monitoring of vital signs were suggested. Four days later the patient was transferred ashore in a stable condition, where he underwent surgery for appendicitis at Parkway Shenton Hospital Singapore which is in affiliation with SHIPMEDCARE.

Achievements:

Had the vessel turned around to Hong Kong, she would have missed her loading dates for next cargo .The deviation costs alone would have been 4 days of time-value ,plus bunkers-value, estimated at approximately USD 80k plus USD 20k respectively, at the then prevailing freight & bunker conditions. Furthermore exacerbation of condition and illness liability were avoided.

Avoided: Deviation expenses, delay in Cargo delivery



Case study 2: On Board Medical Advice and Management: *Epidemic Containment*

Medical Issue: Gastroenteritis – Possible Epidemic

Medical Information Received:

Vessel en route. Seven crew members presented with high fever and diarrhea.

SHIPMEDCARE Action:

Medical Advice (diet, sanitary rules, medication) was provided on board (gastroenterologist's consultation) in order to contain the situation. The symptoms resolved and after a few days all crew members returned to their daily duties. No additional incident noted. None of the crew members was examined ashore.

Achievements: medical case resolved, containment of epidemic.

Avoided: possible quarantine of the vessel, legal expenses, crew replacements costs, unseaworthy crew compliment, incurring daily running costs and increased agency costs, port medical examination, delays in cargo discharge, next charter cancellation.

Estimated Savings through SHIPMEDCARE's intervention: USD 50,000



Case study 3: On Board Medical Advice and Management: Deviation Avoidance

Medical Issue: Chest Pain

Medical Information Received:

Vessel left from Suez Canal to reach Fujairah port. Midway through the trip, a member of the crew experienced intense chest pain.

SHIPMEDCARE Action:

First line doctors of SHIPMEDCARE asked Captain (contact person) to give them more details regarding the medical case (symptoms, history, medication) as well as an electrocardiogram and his blood oxygen level. Captain connected the patient with the Telemedicine Case, took the measurements and sent the results to doctors. Due to cardiac issue Internist sought for a Cardiologist opinion. The results were re-evaluated by the Cardiologist who recommended that the patient should have absolute rest, advised for medical treatment and medical assessment at the arrival port. The captain followed the advice and kept the doctors updated for the next days (3days).

Ten days later the doctors were informed that the patient was not feeling well again and they recommended once more that he should visit a doctor at the arrival port. The vessel was in Fujairah anchorage for some days and due to long distance from the port the patient couldn't be examined ashore. Nevertheless he was again without symptoms. Finally a week later the patient was repatriated from Fujairah

Achievements: patient's condition improved and stabilized

Avoided: port medical examination, deviation expenses, delay in Cargo delivery

1. There are **both financial and soft benefits**, such as **crew retention** *and being perceived as* **a quality employer** *offering a telemedicine service on board*.

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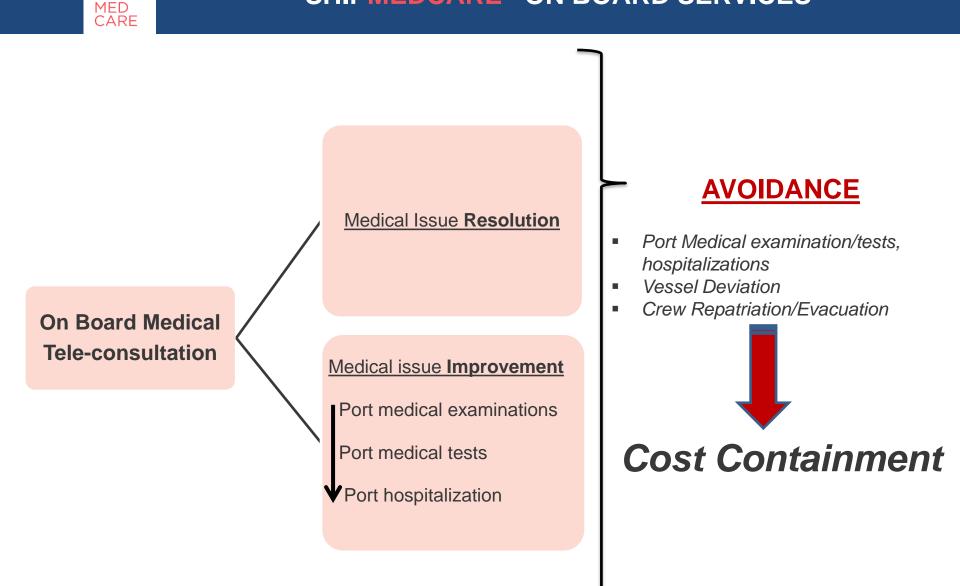
SHIP MED CARE

2. It is **quite possible to obtain a 20% savings to the shipping industry** of perhaps 152 million Euro/year from the deployment of telemedicine on board.

3. There is clearly a great need, for standardisation of pre-boarding medical files available.

Chris Henny, Katharine Hartington ,Stuart Scott , Agnar Tveiten, Luisa Canal (Int Marit Health 2013; 64, 3: 129–135)

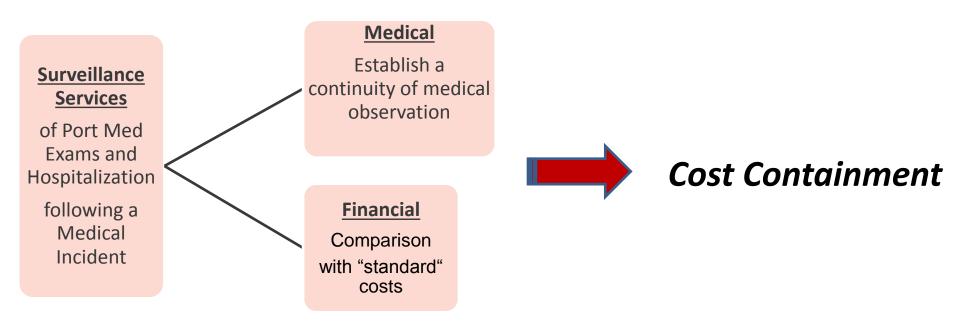
SHIPMEDCARE ON BOARD SERVICES



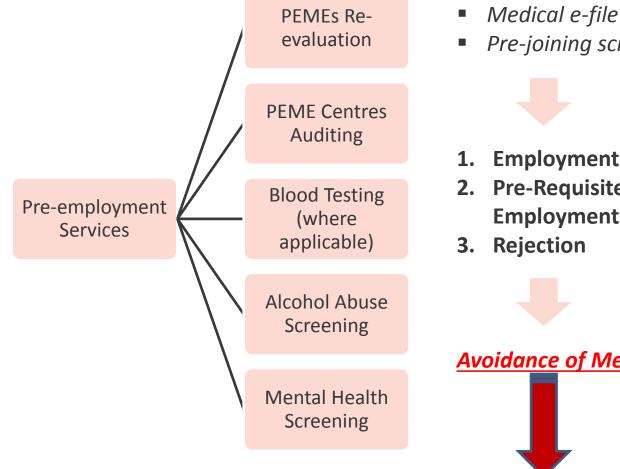
SHIP



SHIPMEDCARE SURVEILLANCE SERVICES



SHIPMEDCARE PRE-EMPLOYMENT SERVICES



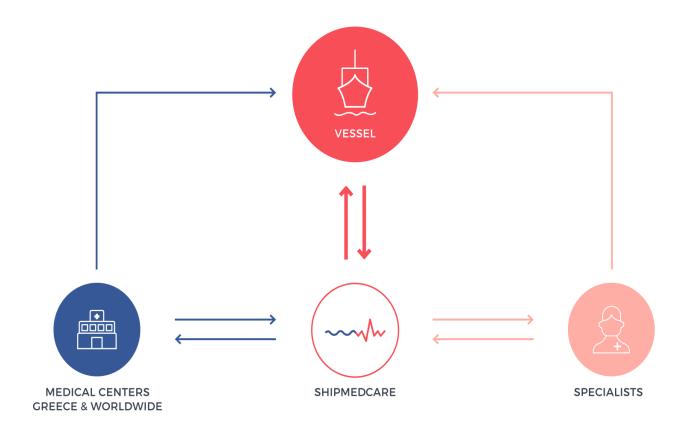
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SHIP MED CARE

> Pre-joining screening Employment 2. Pre-Requisites for **Employment** Rejection **Avoidance of Medical Incidents**

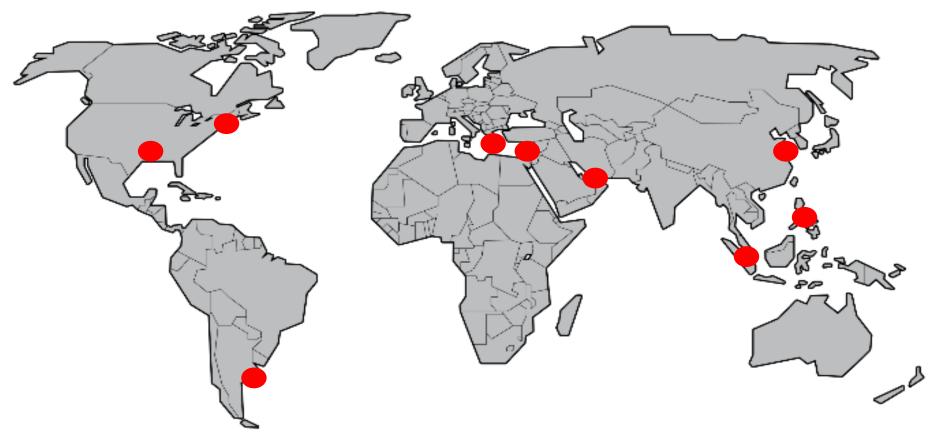
Cost Containment





SHIPMEDCARE COLLABORATING MEDICAL CENTRES





- 1. Parkway Hospital / Shanghai, China
- 2. Parkway Shenton, Medical Centre / Singapore
- 3. Fujairah Port Medical Centre, United Arab Emirates
- 4. Sanatorio Matter Dei / Buenos Aires, Argentina
- 5. Ygia Polyclinic Private Hospital / *Limassol, Cyprus*
- 6. Cardinal Santos, Medical Centre / Manila, Philippines (Collaboration through contracted Specialists)
- 7. Maritime Medical Management / Chapin, South Carolina, USA
- 8. Newton-Wellesley Hospital / Boston, USA (Collaboration through contracted Specialists)
- 9. Athens Medical Centre / Athens, Greece (Collaboration through contracted Specialists)
- 10. Hygeia Hospital / Athens, Greece (Collaboration through contracted Specialists)
- 11. Metropolitan Medical Centre / Piraeus, Greece (in progress)

1. ANDRIANOPOULOS DEMOSTHENIS MD, PhD CONSULTANT **OTORINOLARINGOLOGIST**

2. ALIVIZATOS GERASIMOS MD, PhD CONSULTANT **UROLOGIST**

- 3. CHRYSOCHERIS PERICLIS MD, PhD, FACS GENERAL SURGEON
- 4. CHRYSOCHERIS VASILIS MD, PhD CONSULTANT **DERMATOLOGIST**

5. CONSTANTINO PHILIP CARLO C. MD, PhD CONSULTANT **SURGEON**

6. IKKOS GEORGE MD, PhD PHYCHIATRIST

7. KARAGEORGOPOULOS AGGELOS MD, PhD CONSULTANT **OTORINOLARINGOLOGIST**

8. KARAMPINAS PANAGIOTI MD, PhD CONSULTANT **ORTHOPEDIC**

9. KATSENIS NIKOS MD, PhD CONSULTANT **UROLOGIST**

10. KIROUSIS DIMITRIS MD, PhD CONSULTANT **PULMONOLOGIST** 11. KOUSTAS GEORGIOS MD, PhD CONSULTANT **VASCULAR SURGEON**

12. MITROPOULOS PANOS **DENTAL SURGEON**

13. PAPADIMITRIOU DIMITRA MD, PhD CONSULTANT **NEUROLOGIST**

14. PAPAGEORGIOU VAGGELIS MD, PhD CONSULTANT **ANESTHESIOLOGIST**

15. PETROUTSOS GEORGE PROFESSOR OF **OPHTHALMOLOGY**

16. PHILIPPIDES GEORGE MD, PhD PROFESSOR OF **CARDIOLOGY**

17. POULIAS IRAKLIS MD, PhD CONSULTANT **UROLOGIST** 18. SECHOPOULOS PANAGIOTIS MD, PhD CONSULTANT **GASTROENTEROLOGIST**

19. STOUPI ATHINA MD, PhD CONSULTANT **INTERNIST**

20. TSAKALIS FOTIS MD, PhD CONSULTANT CARDIOLOGIST

21. TSAKONIATIS NIKOS MD, PhD RECONSTRUCTIVE SURGEON

22. NIKOLAIDOU NATALIA CLINICAL NUTRITIONIST/DIETITIAN

23. DIMITRIJEVIC IVANA BS, MA COUNSELOR **PSYCHOLOGIST**

24. IOANNOU SAVVAS MD, PhD CONSULTANT PHYSICIAN- DIABETOLOGIST

25. STEFANOS PARPOS MD. CARDIOLOGY, CARDIOVASCULAR DISEASE, INTERNAL MEDICINE

26. MOUGIAKOS THEDOROS MD, PhD **PSYCHIATRIST**





SHIPMEDCARE TELE-MEDICINE KIT





Maritime Telemedicine Solution

- Blood Pressure
- Pulse
- Temperature
- Blood Glucose
- Blood Oxygenation
- ECG
- Photo, Video



• The Medical e-file contains the results of the **pre-joining examinations**, **medical history** and all information from **medical incidents** during the seafarers employment.

The Medical e-file created by SHIPMEDCARE :

- Can be **used directly by the medical service provider**, be it SHIPMEDCARE's medical team, Port Doctors, or Hospital personnel, instead of being lost, or difficult to retrieve, when time is of outmost importance.
- Can be compared with the results of pre-employment medical examinations of the seafarers, thus ensuring a stringent policy concerning the issuing of "FIT FOR DUTY" certificates.
- Can be used to suggest pre-employment medical consultation and potential treatment in the seafarers home country.

How do we respond

Issue

SHIP MED CARE

Results **, March 2015- August 2017

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SHIP MED CARE

lesults***		Results 2015-2017, as a % of total	Medical case resolved
Medical case resolved	91		Avoidance of port
Avoidance of port med exam	112	1.4% ^{0.4%}	med exam ■ Avoidance of possible epidemic
Avoidance of possible epidemic	5	18.0%	Reemployment prerequisites
Reemployment prerequisites	47	39.5%	Surveillance
Surveillance	25	22.1%	Port hospitalization
Port hospitalization	22		Repatriation
Repatriation	59	9.3%	Port med exam
Port med exam	229	2.0%	Avoidance of
Avoidance of repatriation	10	4.9%	repatriation Improved
Improved	200	45.3% 11.7% 4.3%	
Avoidance of deviation	7		Avoidance of deviation
Non medical consultation	2		Non medical consultation

The International Labor Organization Maritime (ILO/MLO) has required all flag states to "provide seafarers with **medical care as nearly as possible equivalent to the care they would receive ashore**," and to "ensure [...] that medical advice by radio or satellite communication to ships at sea is available **at any hour of the day or night**".

(2006, Maritime Labor Convention)

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SHIP MFD



SHIP MED CARE

CARING FOR YOUR SHIPPING COMPANY'S MOST VALUABLE ASSET THE SEAFARER

<u>... Stay one step ahead</u> <u>of quality control....</u>

