



www.shipmedcare.com

SHIP MED CARE

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





KNOWN FACTS

- Seafaring has always been a dangerous occupation
- Long voyages, extreme weather conditions, illnesses and accidents can take a heavy toll on the health of the crew members.
- Not only are they exposed to greater risk, but seafarers are also isolated from the usual sources of medical care and assistance available to people on shore.

MAJOR GOALS

SAFE, HEALTHY, HAPPY
SEAFARERS

COMPANY / SEAFARER
TRUST AND COOPERATION

PRODUCTIVITY /
EFFECTIVENESS

Pre-employment Assessment & Prevention

- PEMEs Re-evaluation
- PEME Centres Auditing
- Blood Testing
- Alcohol Abuse Screening
- Mental Health Screening

Vessels - Seafarer Medcare

- 24/7 Consultation by Telemedicine
- Collaborating specialists / Medical Centers

Home office Employees Medcare *

- Evaluation of annual check up
- 2nd opinion for any medical issue
- Medical information (lectures, educational seminars)

This is a **very important** aspect of the crew selection process.

Regrettably, a disproportionate number of medical centers (P.E.M.E.) in crew recruitment countries **do not meet the standards** required for this important process.

In many instances pre-hiring **medical reports are not to be taken at face value**. They are proven false in many cases leading to consequences of high medical bills and claims.

- *ShipMedCare could apply, where warranted and convenient, a thorough vetting of medical centres used by crewing agencies and additionally implement random cross checking of PEME's results and comparing them with our own.*

This is a **critical issue** especially in sectors of the industry that have very stringent limits to alcohol intoxication, like **the tanker sector**.

The well-known and long-used internal, or external unannounced Drug and Alcohol tests carried out on board, **have been proved inadequate** .

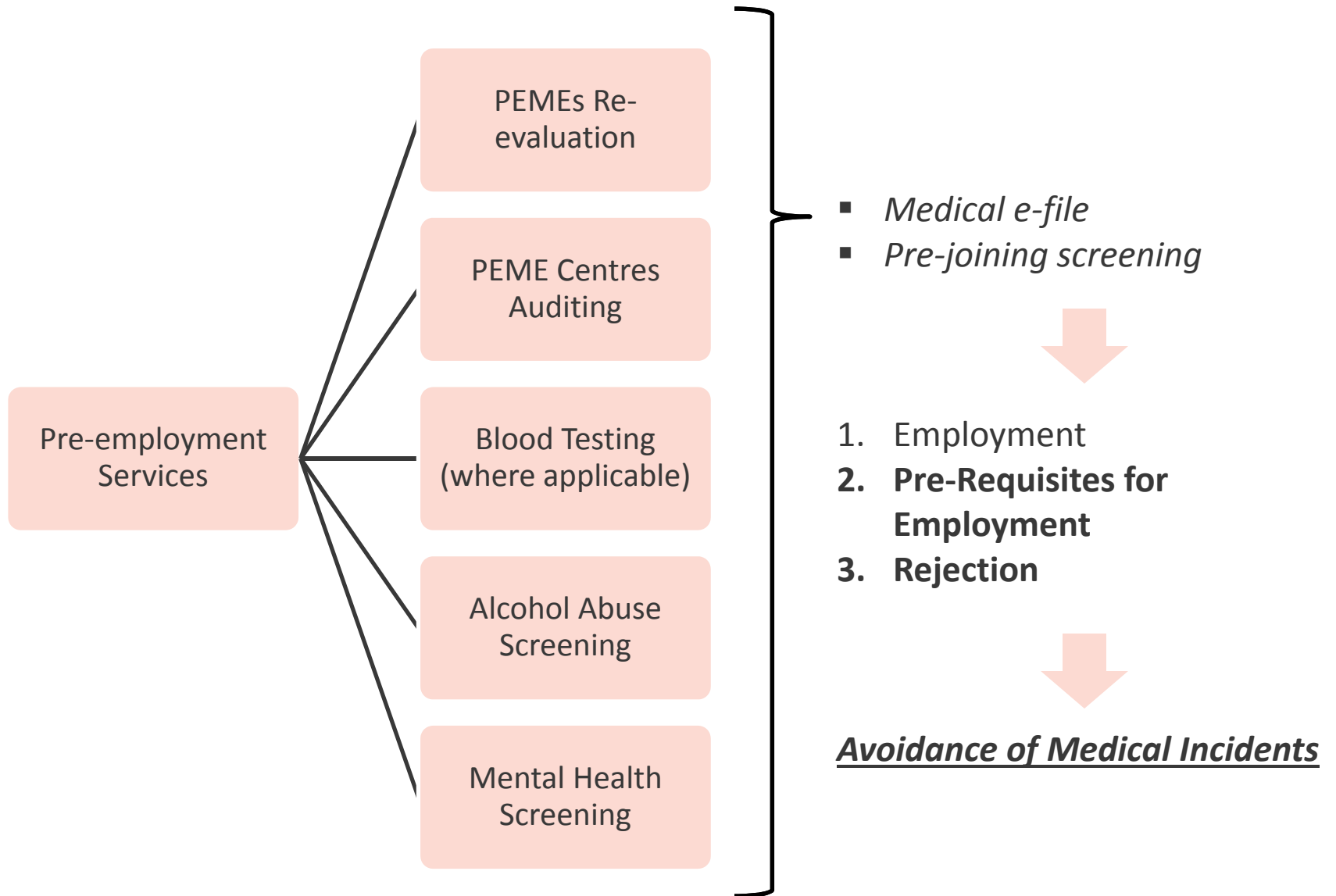
- *ShipMedCare has developed a combination of a questionnaire test, along with blood testing, in order to detect liver function deterioration possibly due to alcohol. Although not 100% fool proof, due to various factors, it can bring to the fore serious addiction and or highly probable alcohol induced liver damage, so as to allow employers to assess seaman's fitness for service.*

This is a health sector, that is **increasing in importance**, when connected to the risks involved.

It is only a matter of time before **mental health assessments become the norm** as professional performance.

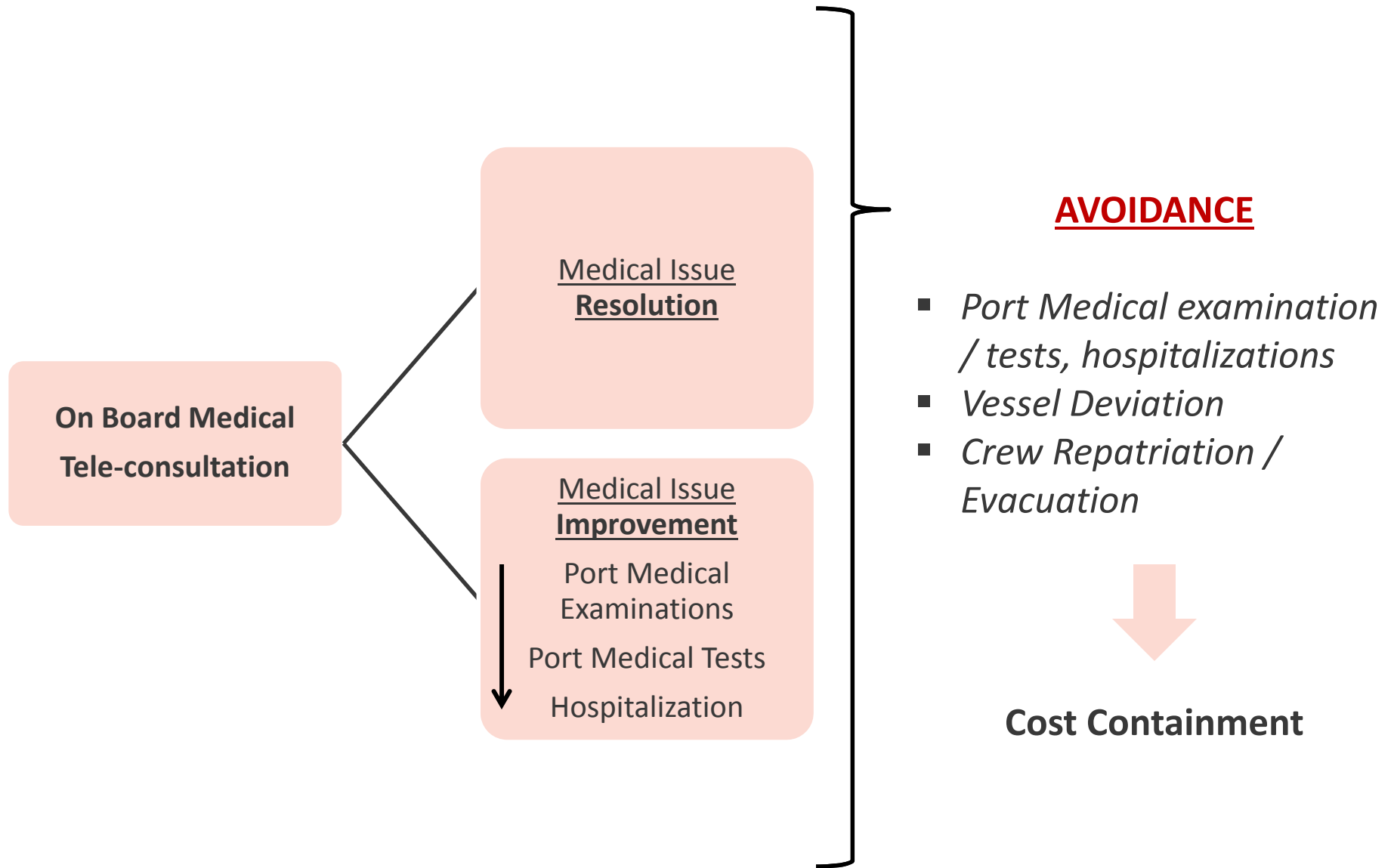
Key points covered by ShipMedCare in this aspect are as follows.

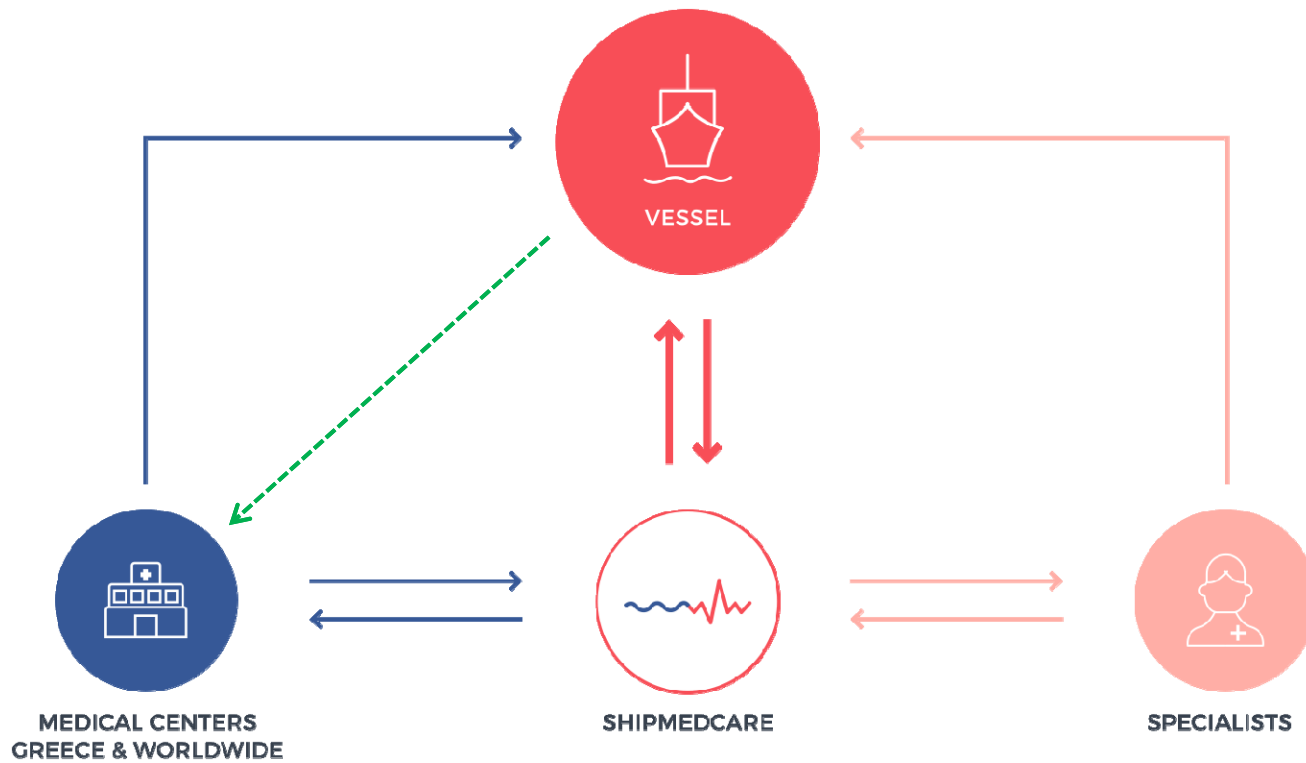
- *Minimize risk of mental conditions at sea through effective screening by the means of a mental health questionnaire at point of recruitment.*
- *Ensuring capability of crew and ship owners to prevent, identify and manage mental conditions early, through proper training.*
- *Providing expert's opinion by specialized psychiatrists on mental conditions appearing on board.*



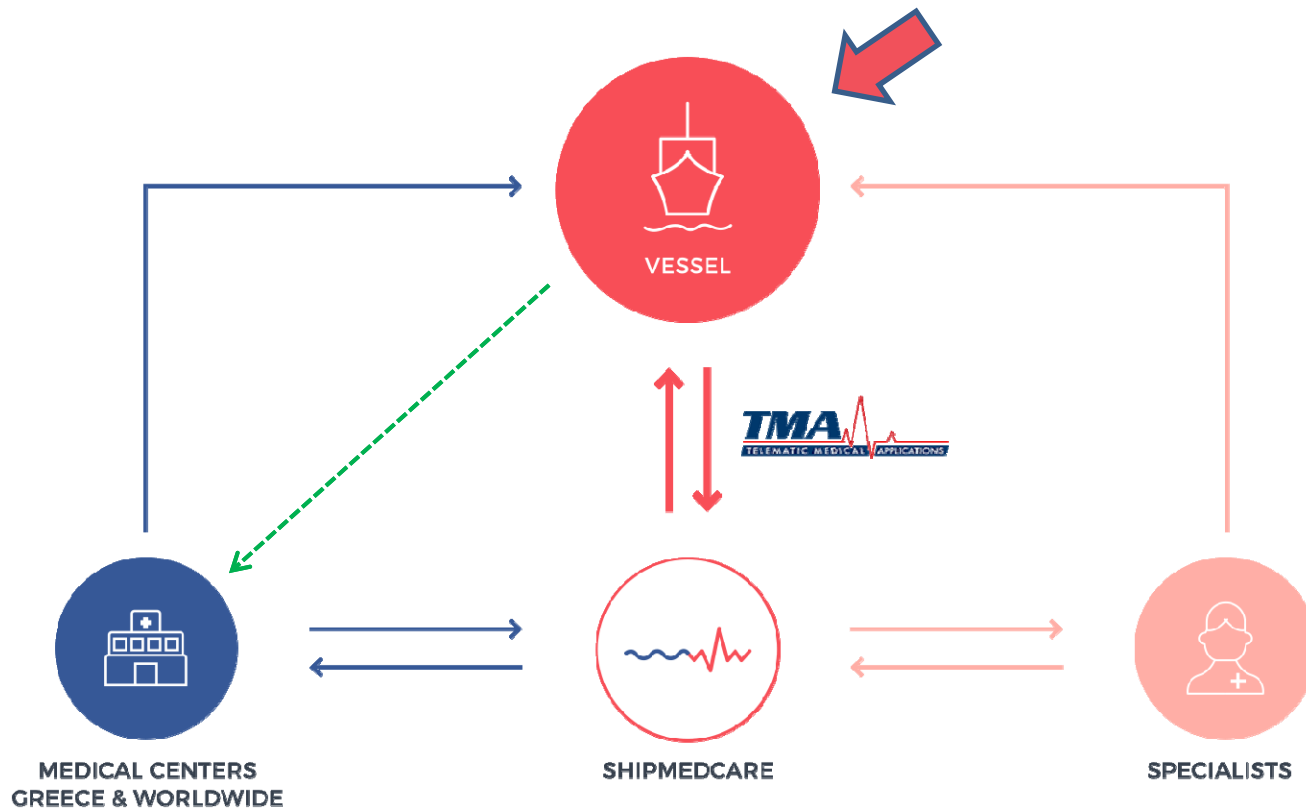


SHIPMEDCARE ON BOARD SERVICES





SHIPMEDCARE ON BOARD MEDICAL TELE-COUNSELLING





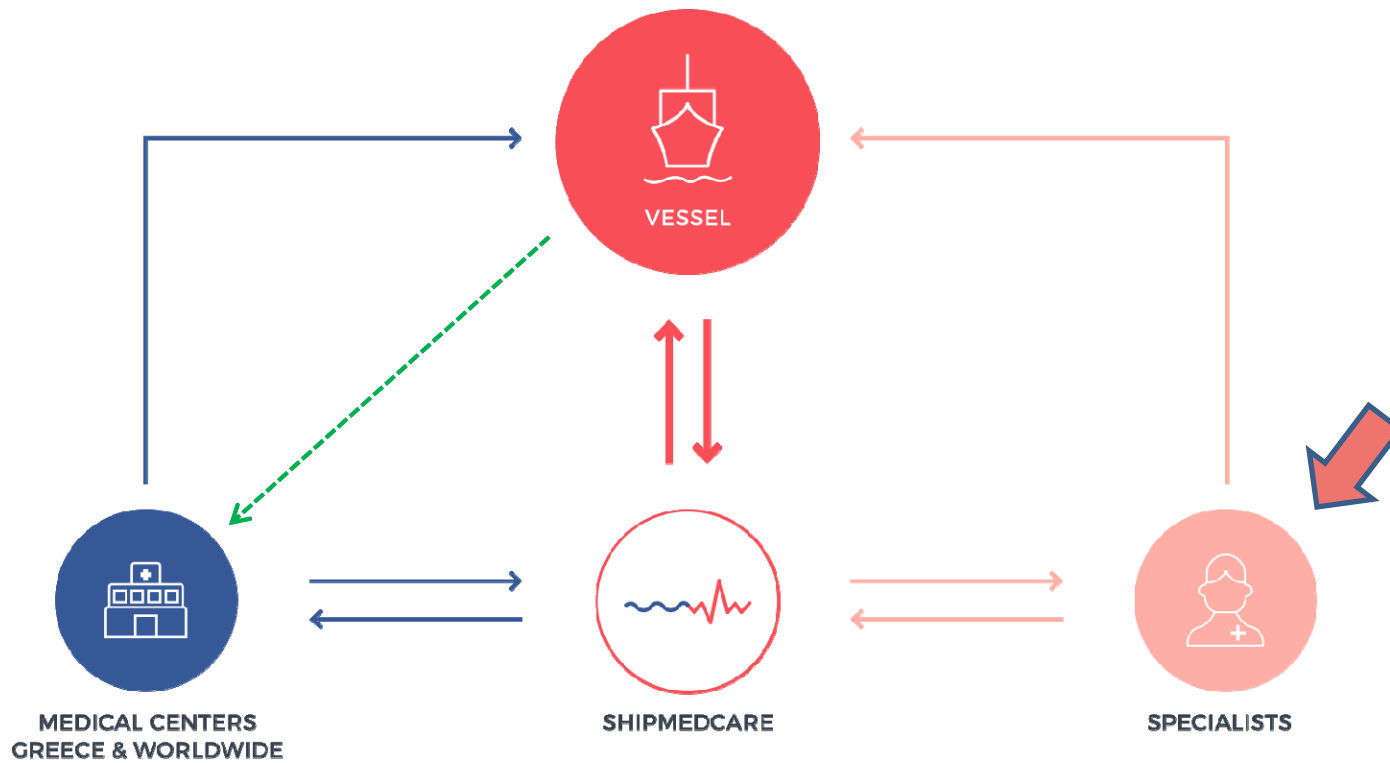
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SHIPMEDCARE TELE-MEDICINE KIT



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

SHIPMEDCARE ON BOARD MEDICAL TELE-COUNSELLING



Sixteen Different Specialties

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
PROFESSOR OF **PSYCHIATRY**

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. PAPAGEORGIU VAGGELIS MD, PHD
CONSULTANT **ANESTHESIOLOGIST**

15. PETROUTSOS GEORGE
PROFESSOR OF **OPHTHALMOLOGY**

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

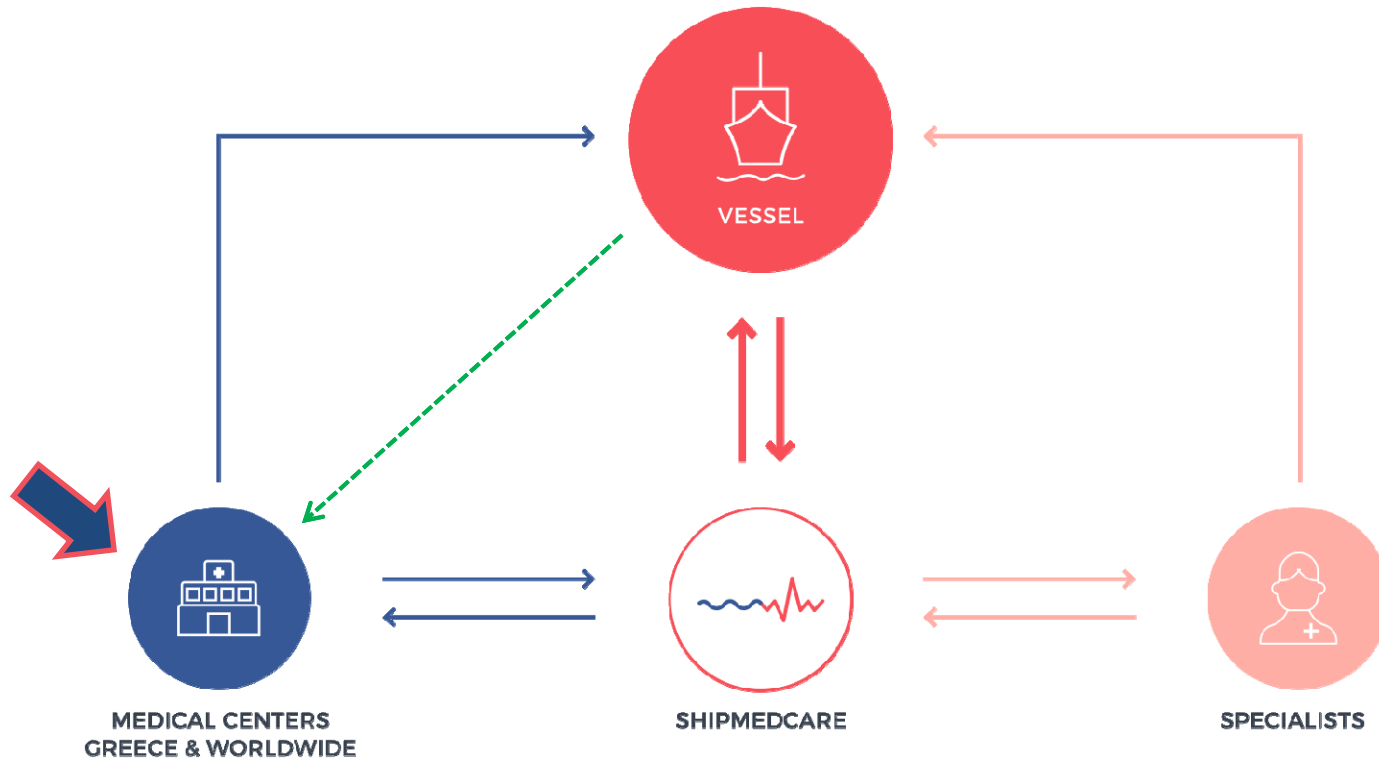
17. POULIAS IRAKLIS MD, PhD
CONSULTANT **UROLOGIST**

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



- Iatrico Medical Centre, Athens, Greece
- Metropolitan Medical Centre, Piraeus, Greece
- Stein Medical Clinic, Vancouver, Canada
- Partners Harvard Hospitals, Boston, USA
- Sanatorio Matter Dei, Buenos Aires, Argentina
- Pulmonary Crit. Care Consultants, Volusia, Florida, USA
- Cardinal Santos, Medical Center, Manila, Philippines.
- Parkway Shenton, Medical Center, Singapore.

“THE BUSINESS CASE FOR TELE-MEDICINE”

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.
2. It is quite possible to obtain a 20% savings to the industry of perhaps 152 million Euro/year from the deployment of telemedicine on board.
3. The deployment of a tele medical service on ships is an opportunity to encourage further cooperation between Telemedicine Assistance Services (TMAS) and also with the private TMAS sector.
4. There is clearly a great need, on a global basis, for more cooperation, particularly in standardisation of pre-boarding medical files available, the equipment required on board at a minimum, and level of service quality provided.
5. A collection of a common TMAS annual set of normalised statistics from the stakeholders in the maritime industry is needed. Should someone not be tasked with collecting this?
6. Open registries and countries where the private sector only provides telemedicine, should be encouraged to work with the global public TMAS system and contribute to its costs?

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.*



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SHIPMEDCARE FIELD EXPERIENCE

In a 14-month period between March 2015 and May 2016, ShipMedCare managed **257 medical cases/issues** occurring on board the 31 vessel fleet of “Prime” and the offshore drilling rig of “Energean Oil and Gas”



SHIPMEDCARE 257 MEDICAL CASES-ISSUES

(March 2015 to May 2016)

CLASSIFICATION	No	%
Surgical (trauma, hernia, skin infection, peritonitis etc.)	53	20.6
Respiratory tract (common cold, tonsillitis, pneumothorax etc.)	32	12.5
Dental (acute – chronic)	31	12.1
Orthopaedic (back pain, arthritis etc.)	30	11.7
Cardiology (hypertension, angina etc.)	28	10.9
Urology (renal colic, infection etc.)	26	10.1
Miscellaneous (dermatitis, poisoning, etc.)	18	7.0
Peptic disease (gastroenteritis, constipation etc.)	16	6.2
Ophthalmology (foreign body, infection etc.)	13	5.1
Neurology (fainting, seizures etc.)	10	3.8
	TOTAL	257
		100

SHIPMEDCARE 257 MEDICAL CASES-ISSUES

(March 2015 to May 2016)

ACTION TAKEN	No	%
1. Consultation (on going treatment, hygiene matters, etc.)	72	28.0
2. Consultation + Treatment	82	31.9
3. Differential Diagnosis + Consultation (establishing correct diagnosis)	28	10.9
4. Differential Diagnosis + Consultation + Treatment	75	29.2
TOTAL	257	100

SHIPMEDCARE 257 MEDICAL CASES-ISSUES

(March 2015 to May 2016)

RESULTS - COMMENTS	No	%
Medical Case Resolved	73	25.3
Port Med Exam (all 23 Dental cases included)	53	18.4
Avoidance of Port Med Exam	45	15.6
Improvement and Port Med Exam	24	8.3
Repatriation	19	6.7
Port Hospitalization	12	4.2
Avoidance of Repatriation	7	2.4
Avoidance of Deviation	4	1.4
Avoidance of possible Epidemic	4	1.4
Reemployment Prerequisites (operation, med. Investigation etc.)	29	10.0
Consideration before Reemployment (chronic illness, annual tests)	12	4.2
Surveillance - Assessment of Medical expenses	6	2.1
TOTAL *	288	100

(* 23 combined cases , i.e. 5+6)



SHIPMEDCARE BENEFITS

- **Improving patient condition** when needed to get ashore for medical examination or hospitalization, thus **protecting seafarer's health and restraining medical expenses**
- **Reducing the risk of medical emergencies on board**, necessitating costly deviations of vessels, air/sea/land evacuations, hospitalizations in high cost locations, or sub-standard locations and in various cases long and costly rehabilitation
- **Establishing a continuity of medical observation** of crew members, through continuous medical guidance – surveillance of their medical issue.
- Taking measures for **early detection and prevention of infectious diseases** in endemic, or high risk areas.
- Establishing **protocols for mental health evaluation** and taking measures to avoid circumstances that may cause mental strain.
- Seafarer's medical e-file can be compared with the results of pre-joining medical examinations thus **ensuring a stringent policy** concerning the issuing of "FIT FOR DUTY" certificates by the various PEME medical centres.
- Demonstrating of employer's commitment to employee's health and well-being, resulting in **increased loyalty to the company** from employees.
- Taking actions, that **mitigate the propensity of medical claims against the company and the subsequent roll-over of such claims to the company's insurer (P&I and or other)**, that will certainly lead to increased premia, affecting the fleet's cost structure.



*We cannot hope to transform commercial journeys to vacation,
but we feel, we should certainly try to lighten the burden....*

