



CHOOSING LIVES OVER WAR

Text by Carolyn Balakrishnan, Taufeeq Wahab and Sophie Ong
Photos by Project Mada 2014

All in a day's work...Taufeeq says

"Grab the *hamsah* and *kiseh* and meet me upstairs!" The medic rushed out of the ambulance, leaving me to figure out the English equivalents of the Hebrew terms, before I chased after him with an oxygen tank in one hand and a chair in the other.

First case of the day and everything was already in full swing. My heart raced but the patient's heart stood still as he lay motionless on the ground. Memories of my cardiopulmonary resuscitation (CPR) training came rushing back as I began my cycle of continuous compressions. As more paramedics arrived, the tiny apartment became crammed with equipment and people frantically attempting to insert plugs, check pulses and read electrocardiograms with what little space they had. Finally, I was told to stand aside. Exhausted from doing the compressions, I willingly obliged, not knowing that paramedics had already made the decision to declare death on scene.

While this was not an everyday case they get on the job, it was one of the few we had the opportunity to experience during our ambulance experience in Israel, as part of Project Mada.

Project Mada 2014... Carolyn says

Project Mada, the brainchild of leader Valerie Tan, was officially launched as a two-week voluntary attachment for National University of Singapore (NUS) students with Magen David Adom (MDA) in Israel, under the direction of King Edward VII (KEVII) Hall.

MDA is Israel's national emergency medical, disaster, ambulance and blood bank service. It is a humanitarian

organisation which treats all humans in need of help equally, without consideration of creed, race or gender. Powered by over 13,000 volunteers and only 1,850 full time employees, the 15 of us medical and non-medical students from NUS got the rare opportunity to be trained and staffed on board various ambulances in two of the largest cities in the country – Jerusalem and Tel Aviv. (For volunteering opportunities with MDA, go to <http://www.mdais.com/volunteers>.)

In preparation for the trip, we had collaborated with the Singapore Civil Defence Force (SCDF) to learn about pre-hospital Emergency Medical Services (EMS) locally. Each student served at least one shift on board SCDF's ambulances, gaining essential background and paramedical experience. We were also privileged to have Ms Sharon Chan, responsible for engineering the Israel connections for NUS Overseas Colleges, to orientate us on the culture and geopolitical situation in the country.

Experience in the Holy Land...Taufeeq says

On the morning of 20 May 2014, the group of 15 nervous but excited students trotted towards MDA's Jerusalem headquarters. Perhaps overwhelmed by the surge of catecholamines, none of us felt jet-lagged despite the long journey from our distant red dot. We entered the building, brimming with anticipation, and were greeted by the very enthused Ms Vicki Angel (Resource Director of MDA Israel). This was the first time MDA was officially receiving a Singaporean delegation. From the set-up of the venue, refreshments provided and friendliness exuded, it was evident that they had put in every effort to make us feel comfortable. As a Muslim, I had been slightly apprehensive

towards going for the attachment. Yet to my awe, one of the first sights I spotted was a Muslim man conducting his morning prayers openly in the hallways. This sense of acceptance and comfort MDA instilled in its members and volunteers not only dispelled my fears, but also cemented the respect we had for the organisation's racial and religious tolerance – a difficult task in a volatile region.

Over the next few days, we attended full-day talks by various MDA directors, covering the organisation's background and roles, the emergency relief services in Israel; and a blood bank tour. Equipped with this theoretical knowledge, we then underwent a 20-hour Basic Cardiac Life Support (BCLS) Course under the tutelage of our trainer Tehila, a fifth year medical student (out of seven years), who covered CPR, first aid and primary trauma management on-site.

We were also taught how to: resuscitate unconscious patients, rescue choking victims; apply bandages and tourniquets; splint fractures/dislocations with ambulance equipment; and manage environmental and animal injuries. Although some of us were Singapore-trained BCLS medical students, we still had much to learn in terms of both content and technique, as the course was tailored to procedures and protocols in the Israeli healthcare service.

Upon finishing our course, half the team remained in Jerusalem, while the other half of our team was sent to Tel Aviv for four days.

Staying on in Jerusalem... Carolyn says

The glint of the sun on the sandstone shone through our curtains, waking us up in time for our morning shift. At 7 am sharp, we reported to MDA's Jerusalem headquarters, fingers crossed and straining to hear our ambulance being called over the loudhailer – which often did not take long. Jerusalem is a rather large district, with roads ranging from large modern highways to narrow unpaved paths scarcely wide enough to fit an ambulance. Often, finding the way to a patient was trickier than treating them.

Getting to the hospitals was another challenge in itself, especially when the patient was suspected to have had a stroke. In such cases, we had to take a long, winding route up the bumpy mountain side to Hadassah Ein Kerem Hospital, the only hospital in Jerusalem with a neurosurgery department, instead of the nearest emergency department. In Israel, drivers have to navigate narrow dirt lanes, security checkpoints, and hilly terrains to get to hospitals located more than half hour's drive from each other. It is overwhelming in comparison to Singapore, where the main difficulty motorists face is the peak hour traffic jams. We have truly been taking our infrastructure in Singapore for granted.

Coincidentally, the Pope visited the Holy City the week we were there, leading to huge traffic blocks and security cordons which further congested a majority of the highways. My driver might have had a greying moustache and prominent



The numerous drugs found in an MICU

wrinkles on his forehead, but looks can be deceiving! With his eyes fixed on the road and constant muttering to himself in frustration, as streams of Hebrew came blaring through the radio on the latest traffic hold-ups, he drove like a real pro, and our speeding ambulance felt right out of the movies.

Despite being just "observers", we offered assistance whenever possible. I was allowed to carry equipment, take brief histories from patients, start them on oxygen, dress simple wounds and sit alongside them en route to the hospital. Whether it was snapping photographs of a road traffic accident for the in-hospital doctors to review or just tucking the patients in with blankets to keep them warm, the little things we did helped us gain a better understanding of the nature of MDA's EMS system, and it felt like we contributed to each patient we attended to.

Meanwhile, in Tel Aviv... Sophie says

Tel Aviv, Israel's financial capital, is very different from the sandstone-strewn buildings of Jerusalem. Skyscrapers creep towards the sky and the city sits against the Mediterranean, jewel of the seas. Beautiful as it all was, we weren't there to sightsee, at least not entirely. Instead, we were in the city for the ambulance experience of a lifetime.

It was an eye-opening experience coming face to face with death twice in a mere four days. One of the fatalities was particularly gruesome – an elderly lady had jumped off from the fifth floor of her building. When we arrived at the scene, we found her right arm dislodged from her body and her head surrounded by a pool of blood. The paramedic had to certify her death on the spot. As horrifying as the incident



Team Mada outside MDA's Jerusalem headquarters

was, it was also inspiring to see how the paramedics handled the situation with composure. The compassionate manner in which they communicated with the deceased's relatives, especially in distressing cases, was also very admirable.

The highlight of our attachment was socialising with the paramedics and medics in between cases. During our time there, they familiarised us with the equipment on both the regular ambulance and the Mobile Intensive Care Unit (MICU, pictured on page 28), in addition to teaching us some basic Hebrew. Words such as oxygen ("hamsah"), stretcher ("mita"), chair ("kiseh") and blanket ("smeeka") came in very handy during our attachment. I was also impressed with the wide array of drugs the MICU was equipped with - including adrenaline, amiodarone, adenosine, glyceryl trinitrate, magnesium sulphate, intravenous methylprednisolone, calcium gluconate, intravenous sodium bicarbonate and tramadol, among many other drugs. They were indeed well-equipped and efficient in their response, and ready to face any emergency that they encountered!

Concluding thoughts... Carolyn says

Wasn't two weeks too short? Yes, it was! I wish we could have spent more time there. However, in that fortnight, we had learnt and experienced very much. What really struck a chord in me was the rigour and dedication of the emergency medical scene in Israel, and how it is very much shaped by the ongoing Israeli-Palestinian conflict. I once asked my driver why he would volunteer with MDA amid the turmoil. His reply reverberates in my mind until today: "When you belong to a country such as Israel, fighting, war and illness becomes

as much a part of your daily life as eating and drinking. How can we, as Israelis, sit back and do nothing as our country is rife with people needing help?"

Would I go again? I would, for there is so much more to see and learn. However, due to recent hostilities, the current situation in the area has become rather precarious. Our hearts go out to our friends in Israel, and we wish for them to be safe. For safety reasons, it was unfortunately decided that Project Mada will not be continued under NUS/KEVII Hall in this year. We hope, however, that we will one day return! ■



Carolyn is a third year medical student who loves to travel and see the world, seizing almost every vacation period to take a trip to a country she has never visited before. She believes that in order to live life fully, you need to see all that the world has to offer.



Taufeeq is an average second year medical student, an infant to the profession, currently stressed out over pathology and microbiology. He is a proud NUS Tembusu College resident who participates in Playhouse and plays tennis in his spare time.



Sophie is a fourth year medical student. She is thankful for the wonderful experiences she has gained on the Israel trip. She loves travelling, adventure and meeting new people. She believes in living life to the fullest and seizing each day.

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