Establishing a progressing trauma service in a general hospital based on emerging multi-organizational network (EMON) logistics

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It is always a challenge for a general hospital to manage cases of severe trauma. A progressing trauma service requires a harmonious environment between different specialties to manage polytrauma cases. To create a unified system, we can apply the emerging multi-organizational network (EMON) logistics to ensure that all specialties can work together.

The key logistics of EMON are Crisis-Driven, Task Oriented, Self-Evolving, Time Sensitive, Composite, and Temporary. These logistics need integration into a progressing trauma service.

Complying with the EMON logistics the entire hospital can function under a single umbrella.

**Crisis-driven** - Trauma causes a great burden in term of fatalities, disabilities and cost. Development of an integrated trauma service within the region is a need to improve outcome.[1]

**Task oriented** - All the relevant specialties in the hospital will come together at the time of a trauma emergency under a single trauma service to avoid collision of tasks and overlapping of work.[1]

**Self-evolving** - Based on other external factors the EMON can evolve without any conscious effort from the organization.[1,2]

**Time sensitive** - EMON in trauma deals with cases of emergency, which requires an excellent time management. It must start from the presentation of a case, till the patient is managed.[1][3]

**Composite** - EMON can only function in a multidisciplinary environment, comprising of all necessary specialties in a functioning hospital.[1]

**Temporary** - EMON is only for the duration of the emergency. After management of a case, EMON ends for that particular emergency.[1][4]

EMON is a tactical measure to bring all units under one umbrella to work without the fear of overlapping tasks and creating chaos.

References
2. Bunker R & Heal S. Splitting an EMON. The Tactical Edge. Fall 2008:58-60

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