



Supporting the rural clinician: decision-making assistance in difficult times

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Let's Talk About...



2025



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Aeromedical services are not always about being the cavalry coming in to rescue the ill or injured, but there is also a role to play in supporting clinicians working in isolation - offering assistance in times of clinical challenge.



The origins of a retrieval service



From humble beginnings.....



To World class

The best fleet

The best pilots & tech crew

Amazing clinicians –
both flight team &
prehospital
colleagues



Southern Critical Care



Te puna wai ora
Southern Critical Care

FLIGHT

TEAM

**DUNEDIN
HOSPITAL**

Rurality



Geographic classification for Health

*North vs. South

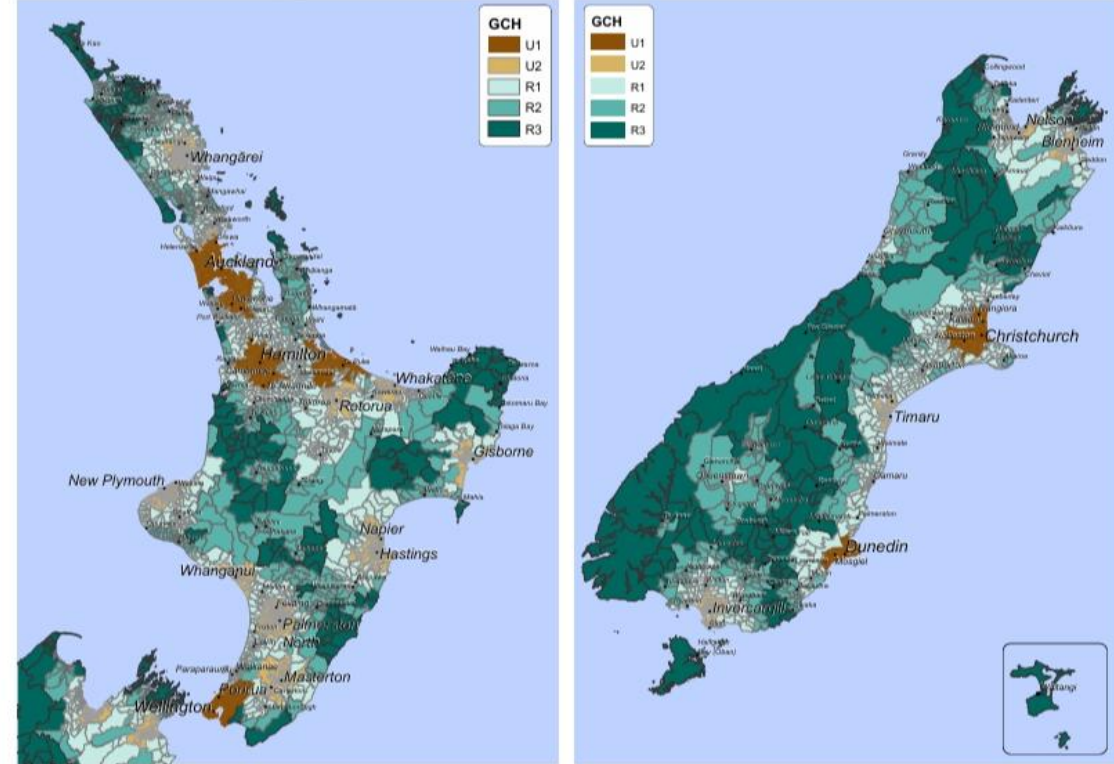
*Urban vs. rural

- population size
- time to access care

*Impact on health outcomes

	Urban		Rural		
	Urban (U1)	Urban (U2)	Rural 1 (R1)	Rural 2 (R2)	Rural 3 (R3)
Major urban (Population ≥ 100,000)	≤25min		>25 to ≤60 min	>60 to ≤90 min	>90min
Large urban (30,000 - 99,999)		≤20min	>20 to ≤50 min	>50 to ≤80 min	>80min
Medium urban (10,000 - 29,999)			≤25 min	>25 to ≤60 min	>60min
Small urban (1,000 - 9,999)				≤25 min	>25min

Maps of New Zealand by Geographic Classification for Health



South Island

Rural Hospitals

21 in North Island

13 in South Island

Service levels 1-3
(based on medical coverage & resources)

New Zealand rural hospitals, including those accredited for training





Challenges facing rural healthcare

- Resource limitation
- Physical distances from larger treatment centres
- Isolation in clinical practice
- Reduced ability to provide local whanau-centred care & socioeconomic effects of this

The way to get started is to quit talking and begin doing.



Walt Disney



A few cases....

To illustrate how we might help.....



Case 1

- Ambulance Comms
- Location: Glenorchy
- 2 children in submerged car
- Distressed family GP
- Making unreasonable requests



Case 2

- 23 day old infant
- Unrecognised sepsis
- Rapid deterioration
- Plan to stage at rural hospital & await retrieval
- Cardioresp. arrest en route
- ICU team dispatched



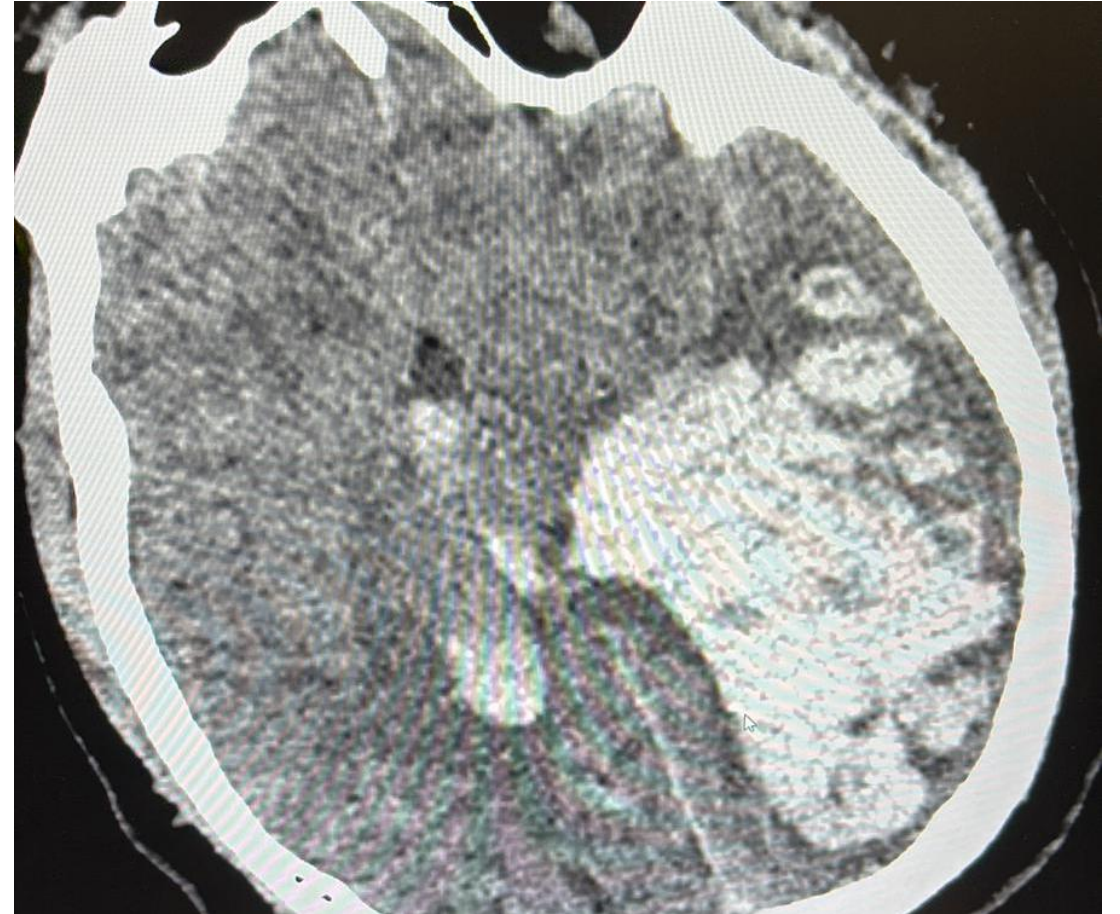
Case 3

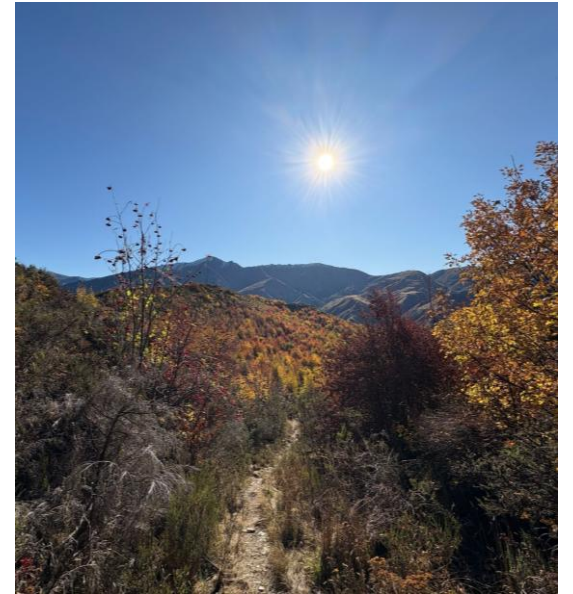
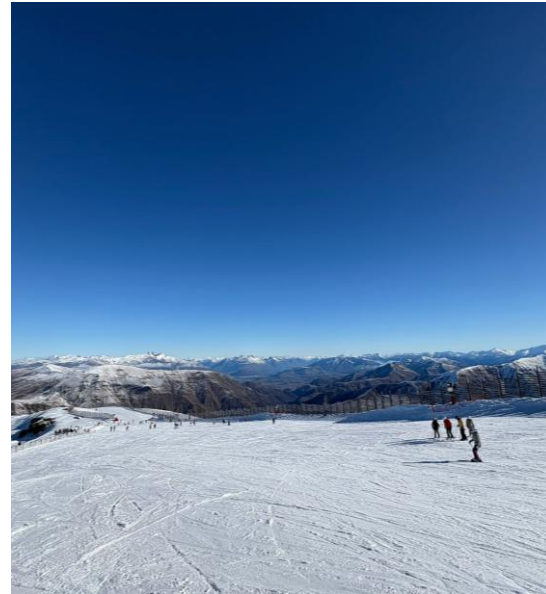
- Call from small rural hospital to retrieve 44 yo female
- Pt moribund on arrival of retrieval team
- Local team assisted to facilitate palliative care pathway
- Another pt transported



Case 4

- 59 y o male sudden onset thunderclap headache
- GCS 15/15 → 3/15 en route to rural hospital
- Intubated & ventilated prior to CTH
- No surgical intervention





Summary

Aeromedical retrieval & transport teams can offer more than just patient transport
They're a valuable source of support & assistance to isolated practitioners working in rural practice settings

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Celebrating
special
colleagues:

