

The importance of general practitioners in emergency and pre-hospital first aid

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Abstract: *The purpose of this study is to determine the critical role and managerial impact of general practitioners in pre-hospital first aid and emergency work. The study subjects were 100 emergency patients treated in a hospital between May 2020 and November 2021. They were randomly assigned to an observation group and a control group, each having 50 cases. The control group followed a standard management protocol, but the observation group included emergency care. Management, compare the management effectiveness of the two patient groups. The observation group's arrival and rescue times were much shorter than those in the control group. Patient satisfaction was much greater in the observation group than in the control group. Conclusion: General practitioners have a broader range of medical expertise and are better equipped to give complete medical care to their patients. Emergency management can enhance general practitioners' productivity, further reduce emergency response time, prioritize patient treatment time, and raise the success rate of rescue. Additionally, patient satisfaction.*

Keywords: *General practitioner; Emergency department; Pre-hospital emergency; importance*

1. Introduction

With the continuous improvement of living standards, automobiles as a means of transportation become more and more common in daily life, and the risk of traffic accidents is greatly increased (Petersen, P. E., 2003). The number of patients admitted to the emergency department is also increasing. The requirements are getting higher and higher. Studies have shown that due to various factors, emergency department patients have a 50% mortality rate within 5 minutes and a 90% mortality rate within 30 minutes. In addition, for patients with heart disease, the failure rate of resuscitation will be as high as 90% to 93% if the first aid is delayed for 1 minute. Therefore, it is very important to adopt a scientific and efficient first aid plan in time. But at the same time, choosing a good emergency doctor is also more important (Douglass, J., 2004).

The emergency department is one of the important departments of the hospital. The disease condition of the patients received and treated is very critical, the risk of death is high, and various diseases and accidents may be encountered, so medical staff need to arrive as quickly as possible on-site, and formulate a medical plan in the shortest possible time, thereby increasing the probability of successful rescue, which requires medical staff to have a higher level of emergency response capabilities and comprehensive professional knowledge (Zhiheng, Z., 2012). Explore the important value and management analysis of general practitioners in pre-hospital first aid and emergency work to improve the success rate of rescue.

Since the 1950s and 1960s, the general practitioner system has been implemented in more than 50 countries and regions (Surian, N., 2003). In countries with a relatively complete training system for general practitioners, general practitioners account for 30 to 60% of the total number of doctors, and they play an important role in universal medical protection (Fujisawa, R., 2008). General practitioners, as the front line of primary medical services, are an important link in alleviating the problems of "difficult medical treatment" and "expensive medical treatment". However, the number and quality of general practitioners are still far from actual needs. Education and training for general practitioners, the system needs to be further improved. General medicine has the characteristics of focusing on overall problems, first-diagnosis and triage problems, and basic emergency problems (Gill, P., 2017). The state requires hierarchical diagnosis and treatment to achieve "first diagnosis at the grassroots level." The trend of large community medical care and the responsibilities of general medicine have determined that general practitioners are an indispensable part of emergency and pre-hospital emergency work.

2. Materials and Methods

2.1 Normal information

100 emergency patients who were treated in a hospital from July 2019 to November 2020 were selected as the research objects, and they were randomly divided into observation group and control group with 50 cases. The age of the control group was 24-58 years old. The observation group was 22 to 60 years old. Inclusion criteria: age range 18 years and above, have fully understood the management methods and are willing to follow the doctor's advice, understand the complete research process and voluntarily sign the consent form. Exclusion criteria: malignant tumor diseases related to organs, systems, etc, have lost clear consciousness, and have emergency diseases such as heart disease. The general information of the two groups of patients is not significantly different ($P>0.05$), and the results are comparable..

2.2 Method

Control group: specialist doctors carry out emergency work and treat patients symptomatically according to their injuries to prevent the injuries from spreading and threatening life safety. Observation group: due to the critical condition of the patient and the rapid change of injury, some uncertain and sudden situations often occur. Therefore, emergency doctors are required to maintain continuity of work and avoid accidents. General practitioners must follow the principles of speed, accuracy, and effectiveness. In the emergency department and pre-hospital emergency room, first rescue the patient's life, then protect the function, first deal with the more severely injured parts, so that the patient can get out of the life-threatening period as soon as possible. If there is bleeding, pressure dressing should be performed as soon as possible, and the collar should be loosened quickly, and the head should be slightly tilted to one side to facilitate the timely discharge of oral secretions. If necessary, carry out treatments such as resuscitation, hemostasis, infusion, and volume expansion. The observation group added emergency management on the basis of routine management.

Strengthen professional knowledge training and improve practical ability. Regularly conduct professional knowledge training for general practitioners in the department, and invite experts or senior general practitioners to give lectures to improve the general knowledge and professional capabilities of general practitioners in the department. Send some general practitioners to higher-level hospitals for learning, learn more about knowledge and techniques, improve their theories and skills, focus on training general practitioners' emergency work skills and emergency response capabilities, and have a comprehensive understanding of general practitioners' specialties and strengthened training. After the completion of the advanced training, this part of the general practitioners will lead other general practitioners in the department to learn and understand new knowledge and new technologies, thereby driving the overall medical level to rise. In addition, explain to medical staff the importance of their positions to patients' diseases, cultivate the professionalism and sense of responsibility of general practitioners, encourage them to study independently, learn more related literature and professional knowledge, so as to expand their knowledge range and make the theoretical foundation more solid and continuously improve your knowledge level. Explain to general practitioners the importance of practical ability at work. During the training process, the training of general practitioners should be strengthened to simulate the scene of severe disasters or serious accidents, and evaluate the general practitioner's practical ability. The assessment content includes injuries. Situation assessment, on-site inspection and recording, rapid triage, bandaging to stop bleeding, fixation, movement, limb dissection, foreign body dissection and hemorrhagic shock(Wyatt, 2006). The general practitioner conducts first aid training on Sims to continuously improve the practice ability of general practitioners , So as to be able to immediately formulate a preliminary solution in the on-site rescue process.

Strengthen the promotion of professional quality. In practice, it can be found that pre-hospital emergency patients are often prone to critical illness, worsening illness, and critical illness(Fullerton, 2012). The patients are often anxious and fearful, and the patients are very worried about their family's financial situation, which makes the patients show obvious bad emotions affect the development of the disease and follow-up treatment. This requires emergency medical staff to maintain a patient and enthusiastic service attitude for a long time, calmly and flexibly respond to various situations, so as to ensure the smooth progress of emergency work, complete tasks and establish a good image, so general practitioners should be regularly organized to perform job duties. Emergency work is obviously sudden, and patients are likely to need to work continuously. In actual work, medical staff must not only complete their own medical tasks, but also understand the patient's psychological and emotional

conditions and provide corresponding supportive treatments(Liu, 2020). At the same time, they need to face the special noisy working environment has caused greater psychological pressure, and sleep conditions have also been severely affected. Departments should use a flexible scheduling system, arrange more medical staff during peak periods, give medical staff more rest time during off-peak periods, encourage medical staff to exercise more, and promote medical staff to work in a better state and improve Health level. Regularly conduct psychological examinations for medical staff, evaluate their psychological endurance, and provide corresponding psychological comfort and treatment.

2.3 Observation index

Statistic and compare the emergency management status of the two groups of patients. Statistic and compare the satisfaction of the two groups of patients.

2.4 Statistical method selection

The SPSS19.0 statistical software was used for data processing, and $P < 0.05$ indicated that the difference was statistically significant.

3. Result

3.1 Comparison results of the emergency management status of the two groups of patients

The comparison of the emergency management status of the two groups of patients showed that the arrival time and rescue time of the general practitioners of the observation group were significantly shorter than those of the control group ($P < 0.05$). See Table 1.

Table 1 Comparison of clinical indicators between the two groups ($x \pm s$, min)

Group	Number of cases	Doctor arrival time	Rescue time
Observation group	50	5.07 \pm 0.31	9.81 \pm 0.27
Control group	50	11.27 \pm 0.17	19.68 \pm 0.21
t value		7.149	13.024
P value		0	0

3.2 Comparison result of satisfaction of two groups of patients

The comparison of the satisfaction of the two groups of patients showed that the satisfaction of the observation group was significantly higher than that of the control group. See Table 2

Table 2 Comparison of the satisfaction evaluation of the two groups on rescue work

Group	Number of cases	Very satisfied	Satisfy	Dissatisfied	Totally satisfied
Observation group	50	23	27	0	50
Control group	50	20	23	7	43
χ^2 value					17.623
P value					0

4. Discuss

Compared with specialists, general practitioners have unique attitudes, skills, and knowledge. They can provide patients with continuous and comprehensive medical services and deal with their conditions as soon as possible. In the emergency department and pre-hospital emergency work, due to the critical and sudden illness of patients, in order to slow the spread of the patient's injuries and reduce the mortality rate, doctors must make accurate judgments of the illness in a short time and be targeted in time. deal with. Therefore, general practitioners have very important value in emergency and pre-hospital emergency work. As an important part of the emergency system, general practitioners can carry out treatment for the first time in the event of a disaster or illness to ensure that they are treated at the golden moment of life(Coppola, 2006), so as to ensure life safety and maintain social order. Emergency patients are characterized by variable conditions and complicated injuries. This situation is

handled by a general practitioner, which will save the patient's life to the greatest extent. In addition, my country's economy in recent years. In addition, with the rapid development of my country's economy in recent years, the incidence of various sudden public incidents has also increased significantly; the improvement of living standards and changes in dietary structure have led to the incidence of various diseases, such as high blood pressure. Significantly higher, rapid emergency treatment can enable patients to be rescued in a relatively short period of time, thereby improving the quality and efficiency of emergency and pre-hospital first aid work.

Compared with specialist doctors, general practitioners have more comprehensive medical knowledge and advanced skills, and can quickly deal with related problems at the emergency scene, stabilize the patient's condition as much as possible, and thus save the patient's life. The results of the study showed that the arrival time and rescue time of general practitioners in the observation group were significantly shorter than those in the control group. The satisfaction of patients in the observation group was significantly higher than that of the control group.

The addition of emergency management can expand the knowledge of general practitioners, and the theoretical foundation will be more solid. Coupled with the exercise of simulation exercises, the general practitioners have more professional pre-hospital first aid capabilities(Knox, 2015), can reach the scene quickly, and in the shortest possible time Evaluate the patient's injury internally, give the appropriate quality, and save the patient's life. Good professionalism and mental state enable patients to have a sense of trust in general practitioners, thereby cooperating more with the work of medical staff, coupled with the patient communication of general practitioners, patients are more satisfied with the hospital's medical services.

Combined with the results of the study, there was a statistically significant difference between the arrival time and rescue time of the doctors in the observation group and the control group ($P < 0.05$). General practitioners play a very important role in emergency and pre-hospital emergency work. However, in order to further improve the work level of general practitioners, it is necessary to: ① Further strengthen the theoretical reserve of knowledge: expand knowledge, combine the current medical technology level, update service concepts, continuously cultivate their emergency awareness, and realize the specialization of general practitioners The process of transformation. ②Continuously strengthen the construction of medical ethics: Only by maintaining an enthusiastic and patient service attitude, and handling the scene accurately and quickly, can the tasks of emergency and prehospital first aid be completed efficiently, and better reflect the general practitioners in the emergency and prehospital emergency work. effect. ③Improve the level of physical and mental health: as general practitioners deal with the emergency treatment process accurately and quickly determine the condition, psychological problems may also be involved, such as large-scale disaster treatment and traffic accident rescue. Therefore, by improving physical and mental health, and exercising the ability to withstand stress, can we not panic and increase the success rate of treatment. In summary, compared with specialist doctors, general practitioners play an important role in emergency and pre-hospital emergency work, which can stabilize patients' injuries in a shorter period of time and reduce mortality.

In summary, general practitioners have more comprehensive medical knowledge and can provide patients with comprehensive medical services, which is of great significance. Emergency management can improve the work level of general practitioners, further shorten the emergency time, and strive for the best for patients(Birnkrant,2018). Timing of treatment improves the success rate of rescue and patient satisfaction.

5. Outlook

We should learn from the advanced experience in the development of general practice, from the national system level, as soon as possible to incorporate general practice into the large emergency and pre-hospital emergency system. General practitioners and emergency doctors, community hospitals and large hospitals are responsible for the two ends of the diagnosis and treatment service system for common(Kripalani, 2007), frequently-occurring and critical illnesses respectively. In community diagnosis and treatment, it is necessary for general practitioners to quickly identify and evaluate patients' emergency conditions and provide effective first aid. Disposal and further transfer the patient to a higher-level hospital for treatment as needed. Training general practitioners in critical and critical illness recognition and first aid capabilities is a requirement for perfecting the three-level medical institution network system, which is conducive to the formation of a continuous medical security service system from early detection, early treatment to specialist treatment(Axisa, 2005). Only by

correcting the weakening of emergency service responsibilities in the functional positioning of general practitioners in my country can the subjective initiative of general practitioners' emergency medical practice education be enhanced.

Targeted design of clinical emergency practice teaching content oriented to the actual needs of general practitioners, with sufficient teaching time, guided by the clinical practice needs of general practitioners, truly applying what has been learned, and seamless connection between theoretical learning and clinical practice(Darling-Hammond, 2014). It is recommended to add practical courses in the emergency practice education of general practitioners, such as patient communication, initial diagnosis and triage exercises, and emergency treatment and referral exercises for various single emergency symptoms. Students are required to be able to work in tight schedules, insufficient patient data, and huge workload. Be able to remain calm under the pressure of, train expression and communication skills, strengthen the recognition training of acute and critical illness, and make rapid decisions about treatment.

Give full play to the role of case teaching and reflective teaching. In general practitioners' emergency practice education, we should fully focus on clinical case discussions, promote the combination of theory and practice, expand clinical medical knowledge, and reflect on experience and lessons. Since the clinical practice resources of medical students in my country are relatively insufficient, they are more obvious in general medicine education. To supplement the lack of resources, it is more necessary to give full play to the role of case teaching and reflective teaching. Attach importance to every case involving general medicine students, let students record, share, fully discuss, reflect and summarize in detail, achieve self-evaluation, and take the initiative to improve, which is conducive to making good use of practical learning resources and developing summary and improvement in clinical work Good practice habits.

Encourage simulation teaching. The application of simulation teaching in general medicine emergency clinical skills teaching plays a very important role. It is an important means to promote the combination of theory and practice and master clinical skills. Emergency medicine is highly practical and enhanced simulation teaching can help general practitioners improve their clinical emergency skills. In general practitioner education, there is widespread neglect and weakness in the simulation teaching link. Strengthening the simulation teaching link can improve the quality of clinical teaching and clinical skills, and it is also an important supplement to some limitations and deficiencies in clinical teaching. Emergency simulation teaching includes operation from a single emergency rescue skill, various scenario simulations, group coordination exercises, and stress emergency psychological training, to lay the foundation for later practical operations. The simulation training center's real emergency rescue and ICU environment is a necessary stage before students enter clinical practice, and it is also an important consolidation and supplement to clinical practice teaching.

Strengthen the establishment of a real-time two-way multi-dimensional evaluation system for emergency clinical teaching of general practitioners(Fatima, 2020). French general practitioners have a high degree of informatization in practice teaching, which facilitates the communication and interaction between teachers and students and teaching evaluation. It is recommended to strengthen the construction of basic information in the practice education of general practitioners in my country, and pay attention to the formative evaluation of teaching. The intern general practitioner summarizes the content of the internship in a timely and detailed manner, uploads and saves it online, as the basis for the formative evaluation of teaching. Using information technology, students communicate and interact with teachers in a timely manner, evaluate teaching effects from students, teachers, and teaching management departments in a multi-dimensional manner, and reflect the situation of emergency clinical teaching in a real-time, two-way, and multi-dimensional manner. In summary, through the analysis of the French pre-hospital first aid and general practitioner training system and the comparison of the training of general practitioners in my country, it is suggested that my country should pay more attention to the training of general practitioner emergency and pre-hospital first aid capabilities. At the same time, in the training of general practitioners, it is necessary to create specific emergency clinical teaching for general practitioners, give full play to the role of case teaching combined with reflective teaching, strengthen simulation teaching, and establish a real-time two-way multi-dimensional evaluation system. The key to general medicine talents needed in the practice of emergency department and pre-hospital emergency medical care.

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