

Abstract:

Introduction: The land of Iran is a vast country. Territorial features have caused critical infrastructure dispersal, such as water and fertile soil resources in the Iranian territorial domain. This dispersal has created a decentralized range of human communities, with specialized health care centers concentrated in cities and metropolises. Lifestyle in Iran makes the inevitability of a state-of-the-art fleet in the pre-hospital emergency system unavoidable. The aim of this study was to evaluate the technology of telemedicine in pre-hospital emergency system to provide evidence to help policy maker's countries.

Method: A systematic review was conducted on the effectiveness of the first step and the next step according to the observation of clinical data ٦٧٤٣ patient records by hospital emergency services had received, examined and data analyzed by SPSS software. The next section discusses servers and the technical power of computers and biometric data transmission equipment. In the economic evaluation dimension, cost-effectiveness method was used. Costs in this study were extracted from the perspective of health system and cost lines in the Pre-hospital Emergency Management and Emergency Management Organization of Type ٣ universities of Iran. All the collected data were analyzed by the software Tree age. In the organizational dimension, a qualitative approach to customary content analysis was performed, Landman and Granheim method were used for data analysis. The code was extracted from MAXQUDA ver. ١٠ software.

Results: There was a significant difference in the percentage of angina transformed into myocardial infarction due to distance and time variables, especially in rural and shift areas before the hospital, and length of stay in hospital and intensive care unit. This technique was reduced. Various studies on safety in this area concluded that the application of appropriate techniques and no adverse side effects were observed. Decreases in effectiveness after ٩,١٢٩ days of intensive care and ٣٣ percent reduction in the risk of permanent damage in patients with coronary artery disease has been damaged. In the economic evaluation, according to the findings of the survey findings resulting from the software and telemedicine technology is cost effective. In the organizational aspect, according to the qualitative data obtained from the research, due to the lack of specific laws and regulations in the Ministry of Health and Medical Education, there was no specific tariff on existing insurance, and especially the lack of rules on the authority of therapeutic interventions of the therapist and interest in management. There are no senior universities to use this technology.

Conclusion: Based on clinical findings and software-based findings, it is recommended to use telemedicine technology in the pre-hospital ambulance setting.

Keywords: Health Technology Assessment, Telemedicine, Pre-hospital Emergencies



Kerman University of Medical Sciences

Faculty of Management and Information
In Partial Fulfillment of the Requirements for Degree MSc

Title:

Evaluation of telemedicine technology with wireless technology in the management and management of patients in pre-hospital emergency care and its comparison with wireless technology

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۲۰۱۹