Commentary

A Short Note on Rural Emergency Medicine

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DESCRIPTION

Rural emergency medicine is urgent or emergent medicine that is practised in areas with low population densities and limited resources, such as access to more specialised treatment facilities. Rural emergency departments provide vital services to their communities, including earlier evaluation and entrance into the healthcare system, stabilisation and treatment beginning, and coordinated transport to a tertiary care centre. Rural emergency departments, despite their low patient counts, have a similar variety of case presentations as urban tertiary hospitals, with the added challenge of managing high-acuity situations with limited resources.

There are no standardised descriptions of the resources accessible to rural emergency departments around the world, which makes it difficult to compare clinical procedures and standards of care amongst units with similar resources. The Rural Health Research Centres are intended to assist policymakers in better understanding the challenges that rural communities confront in ensuring inhabitants' access to health care. The findings of the Centres' research are shared with a wide range of national, state, and local decision-makers who are concerned about rural health.

The Federal Office of Rural Health Policy is currently funding rural health research centres, focuses on health insurance coverage, Medicaid, behavioural health, long-term treatments and supports, and issues faced by Rural Health Clinics (RHCs) and Critical Access Hospitals (CAHs) in delivering and sustaining care for rural communities, among other topics.

Emergency medicine is the branch of medicine that deals with illnesses or injuries that require emergency medical intervention. Various emergency medicine models exist internationally. Emergency medicine is a medical specialty—a field of practise

centred on the knowledge and abilities needed to prevent, diagnose, and treat acute and urgent sickness and injury in patients of all ages suffering from a wide range of undifferentiated physical and behavioural disorders. It also includes a comprehension of the pre-hospital and in-hospital emergency medical systems, as well as the skills required for their development. Emergency medicine is a specialty that deals with the treatment of urgent medical and surgical disorders.

Many patients are seen by emergency physicians in modern emergency care, who treat their ailments and arrange for their discharge either admitting them to the hospital or discharging them after treatment, as needed. They also give episodic primary care to patients who do not have a primary care practitioner during off-hours. The majority of patients report to emergency departments with low-acuity situations (such as minor injuries or chronic disease exacerbations), but a tiny percentage will be critically ill or injured.

Surgical treatments, trauma resuscitation, advanced cardiac life support, and advanced airway management are just a few of the abilities required of an emergency physician. They'll need to be able to resuscitate a patient (intensive care medicine), manage a difficult airway (anaesthesiology), suture a complex laceration (plastic surgery), set a fractured bone or dislocated joint (orthopaedic surgery), treat a heart attack (cardiology), manage strokes (neurology), work up a pregnant patient with vaginal bleeding (obstetrics and gynaecology), control (radiology).

The American College of Emergency Practitioners (ACEP) represents emergency medicine physicians and provides opportunities for education, advocacy, and research. Oversees the Rural Emergency Medicine Section, which develops and discussion and debate about pre-hospital, primary care, and tertiary care hospitals that serve rural emergency patients.

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