**Overview**

The International Search and Rescue Advisory Group (INSARAG) Medical Working Group (MWG) met in Qatar on 13-15 October, 2023 immediately preceding the Turkiye/Syria AAR and AEME Regional meetings. Other INSARAG working groups met simultaneously and this permitted interaction and coordination among all working groups.

This meeting was hosted by the Qatar Internal Security Force (ISF) in Doha.

The list of participants in this MWG meeting can be found in **Attachment A**.

The MWG meeting agenda is listed in **Attachment B** and major discussion points and achievements are listed below.

**Summary and Action Points**

1. **Plenary session**
	1. All working groups met in a plenary session to begin the meetings.
	2. The INSARAG Secretariat provided opening comments and made the request that each working group needed to provide input into the action items for the Turkiye/Syria After Action Report (AAR).
	3. Copies of the draft Turkiye/Syria AAR were provided with a comment template to each working group.
2. **Welcomes and introductory remarks**
	1. Dr. Sakamoto (Japan) and Ms. Coopman (France) were introduced and welcomed as new members of the MWG.
	2. Other introductory remarks were made:
		1. A brief review was done of accomplishments at the Singapore MWG meeting earlier this year.
		2. A brief review of the proposed agenda was conducted and the draft agenda was accepted by the MWG.
3. **Turkey/Syria earthquake AAR input**
	1. The Turkiye/Syria AAR action items relevant to the MWG were reviewed.
	2. In addition, the MWG reviewed other action items for accuracy and relevance.
	3. The MWG developed inputs to the Secretariat utilizing the standardized reporting format provided. This can be found as **ATTACHMENT C** to this report.
	4. A summary of action items provided include:
		1. The MWG has already completed enhancements/updates to the Crush and Amputation Technical Reference notes
		2. The MWG will work with the GRG to ensure guideline revisions include more emphasis on the provision of USAR medical care to patients while still entrapped.
		3. A communique will be developed by Dr. Eckhardt for review by the Secretariat and then potential dissemination to classified teams reminding them of the importance of initiating medical care prior to extrication of victims.
		4. The MWG will initiate a technical reference note on behavioural health best practices for teams. A first draft will be developed by Dr. Fuentes.
		5. The MWG will continue ongoing collaboration with the WHO Emergency Medical Teams (EMT) initiative.
		6. The MWG will work with the Secretariat to streamline procedures for seeking permission from impacted countries to practice USAR medicine (as defined earlier by the MWG).
4. **Asbestos and other particulates Technical Reference Note**
	1. The MWG worked on the development of a technical reference note that addresses best practices (non-mandatory) to reduce the risks teams posed by exposures to particulates (e.g. asbestos, silica, etc.). This became the major theme of the MWG meeting due to its complexity.
	2. The MWG was reminded that this was a task assigned by the Team Leaders and Secretariat as a result of the Turkiye/Syria AAR meeting in Singapore.
	3. A draft document was provided for commentary and review. After edits made by the MWG, a final draft is provided as **ATTACHMENT D**.
	4. Given the importance of this topic, and the nature of the hazard, it was determined that this draft document should be circulated to other working groups for input such that it becomes a joint product from all the work groups.
5. **Meeting with Guidelines Review Group (GRG)**
	1. The MWG met with the GRG to initiate discussions regarding the rewrite of the INSARAG Guidelines.
	2. As part of this discussion, Dr. Eckhardt was nominated as a liaison to the GRG to maintain visibility on the rewrite process and coordinate inputs from the MWG.
	3. The MWG will use the requirements of the guidelines review as a major theme for its next meeting in 2024.
6. **Meeting with the Information Management Working Group (IMWG)**
	1. A meeting was requested by members of the IMWG.
	2. The main point of discussion was the Victim Extrication form and its contents.
		1. The MWG provided edits that can shorten the form.
	3. This form was not developed by the MWG but it does have a (limited) role to medical providers. Notably, the Victim Extrication form could become central to any family reunification efforts.
	4. Therefore, it was suggested that the numbering system used on the Victim Identification form be consistent with the Patient Treatment form (which is a MWG product).
	5. After the meeting with the IMWG, the MWG revised the Patient Treatment form to ensure consistency of numbering and this is provided as **ATTACHMENT E**.
	6. This will be provided to the Secretariat for posting on the website.

1. **Requesting permission to practice USAR Medicine**
	1. The team met with the Secretariat to discuss the acceptance by impacted countries of medical components of USAR teams.
	2. It was emphasized that the delivery of healthcare while patients are still entrapped is considered an essential humanitarian activity and this specific verbiage has been adopted by the Team Leaders and the INSARAG Steering Group (ISG).
	3. The MWG will begin the development of a guidance note indicating the different ways this may occur and proposed methodologies include:
		1. The Secretariat, when interfacing with impacted countries, seeks to obtain a blanket acceptance of medical providers associated with USAR teams.
		2. The Secretariat, when interfacing with impacted countries, can provide forms form specific teams that indicate capabilities being provided by USAR teams. This form was developed during this meeting by the MWG and is included as **ATTACHMENT F**.
		3. If the Secretariat is not involved in the solicitation of USAR assistance, teams would need to gain bilateral acceptance for the medical component of their USAR team and the letter developed by the MWG last year could be utilized in this effort.
	4. The MWG will continue work on this topic and work with the Secretariat on this process in an effort to have a product that can be incorporated into the guideline revisions.
2. **Medical oxygenation and ventilation in the USAR environment**
	1. A brief high-level discussion was held regarding field abilities to provide oxygenation and ventilation to patients in the USAR environment.
	2. Highlights of the discussion included:
		1. The challenges of transporting oxygen to the impacted country
		2. The medical needs for USAR patients
		3. The medical needs for injured/ill team members
		4. Sources for oxygen in the field
		5. Oxygen concentrators and their limitations
		6. Ventilatory support options for patients in the field
	3. The MWG will work on the development of a non-mandatory Technical Reference note to provide guidance/best practices to teams.
3. **Close out**
	1. The MWG reviewed its progress and its trajectory in the coming year.
	2. It was agreed that the guidelines review will form the main theme for the MWG work in the coming year.
	3. The MWG moved back into a plenary session for discussions on the coming week activities related to the Turkiye/Syria AAR.