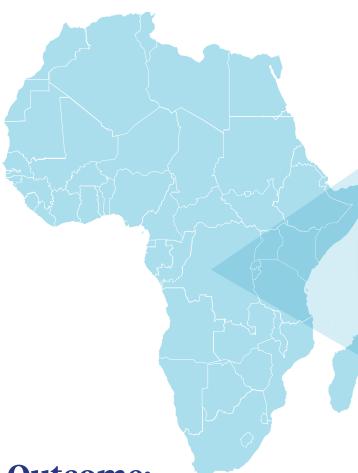


## Case Study: Medical Evacuation From Isolated Locale

Location: Remote Africa **Duration:** March 2020



## **Situation:**

A member suffered a traumatic leg injury in remote Africa. The injury was so severe it put them at risk of losing a limb without proper and quick intervention. Multiple obstacles stood between the member and the critical care needed:

- The closest airport was 8 hours away
- The airport landing strip was unpaved, unlit and could only be accessed by special aircraft types
- COVID travel restrictions

## **Outcome:**

Working with urgency to deliver appropriate end-to-end care excellence, our team of diverse experts leveraged technology and data to help deliver the proper assistance.

- · Identified the closest and most qualified regional air ambulance provider who can respond efficiently, timely, stabilize the patient and provide the care the patient would need in the air
- Emergency Response Center (ERC) assessed all the evacuation options based on conditions, locale and timeframe within which the patient needs to reach care
- Clinical Team selected the most appropriate Level III trauma center in South Africa, where the member underwent comprehensive diagnostic and limb saving procedures
- ERC then coordinated an air ambulance flight from South Africa to the U.S. and arranged a seamless admission to the U.S. facility where the member continued their ongoing care

