

# Multidisciplinary Care of a 13 Year Old Syrian Child

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**M**ost of the wounded Syrians who arrive at the Ziv Medical Center share the same predicament. The wounded arrive more than 24 hours after the event, and there is no information about their previous medical treatment. They come with no documentation or results of radiology or other assessments [1]. Treating such cases requires additional investigations and recurrent examinations and tests necessary for making the proper diagnosis and for appraising the patient's condition. The medical center staff is further challenged by the fact that these patients arrive without family, hear a foreign language, and do not know where they are.

## PATIENT DESCRIPTION

A 13 year old Syrian boy was admitted to the emergency room with a bullet wound in the abdomen. The only information the staff had of the patient's medical history was that he had been wounded in the abdomen and had undergone surgery 24 hours earlier, according to verbal reports from his mother. No other details were known.

On arrival at the hospital emergency room, the boy was fully conscious and his hemodynamic status and respiration were stable. He showed signs of a gunshot wound to the right upper abdomen and of having had a laparotomy. A computed tomography (CT) scan demonstrated absence of spleen (after splenectomy) and a small amount of free air.

Abdominal surgery revealed evidence of a splenectomy, pancreatic tail resection, and bloody peritoneal fluid. The patient was stable throughout the surgery as well as afterward, under anesthesia and on a respirator. He was transferred to the pediatric intensive care unit (PICU) for further treatment. In the PICU, he developed signs of shock (tachycardia, hypotension, and decreased urine output). After his condition was stabilized, the disease process was uneventful; however, 2 weeks later a second laparotomy was necessary due to fever.

Every patient transferred from the Syrian border to Israel is given a full workup and prescribed antibiotics according to protocol and appropriate to the injury. It is important to note that patients who arrive at our facility have undergone initial treatment in Syria, such as abdominal surgery, insertion of drains and catheterization. We pay particular attention to these drains because catheters can be a source of infection and should be replaced as soon as possible. Since most of the bacteria infecting these patients are resistant to antibiotics, the majority of wounded Syrian patients must be kept in isolation.

## COMMENT

This case of a wounded boy from Syria demonstrates the challenges faced by the treating staff. We chose to highlight this case because it verifies the complexity of treating patients from Syria who have no documents regarding their current situation and prior treatment. A second issue is providing emergency treatment to children without the signature of a parent or guardian. Treating such patients is an extremely difficult process that requires involvement of experienced staff members who are alert to unique problems that may arise and who can address medical and ethical issues. The personnel must be aware of the entire spectrum of problems and challenges surrounding the child and must address them all.

To resolve the problem of lack of data on treatments provided in Syria, we decided that every wounded Syrian who was previously treated in Syria would undergo a total body CT scan, a series of blood tests, and bacteria culture due to the high prevalence of antimicrobial resistance [2,3].

According to the Israeli Patient Rights Law, the consent for all surgical and medical interventions to save lives must be signed by three specialists. All other medical actions can be conducted with guardian consent or by court order.

In addition to the ethical complexity, there are other issues related to communication with the child in an intensive care setting where staff members must create a patient-friendly environment to help recovery. Medical professionals must not only speak the language of their patients, but must understand their culture in order to help and encourage the patient to do what is necessary to proceed in the treatment process. Although there are some differences between Syrian Arab

culture and Israeli Arab culture, there are many similarities that enable the staff at Ziv to assist these unfortunate Syrian civilians needing medical help.

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