

The Special Session on Military Medicine will be comprised of two parts. The first presentation will outline how the new specialty of Military Medicine has been developed in Ireland, and give details on the modules, competencies and learning outcomes of the specialist training programme. The second presentation will provide an insight into the experiences of the Irish Naval Service involved in the ongoing operational deployment to assist in the Mediterranean refugee crisis, and look at some of the occupational medicine implications of this deployment.

Presenters: ¹Lt Col Dr John Paul Hickey, ²Lt Cdr Anthony Geraghty

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1706a **EXPLORING NEW FRONTIERS IN MEDICAL TRAINING: A JOURNEY THROUGH THE DEVELOPMENT AND LAUNCH OF THE HIGHER SPECIALIST TRAINING PROGRAMME IN MILITARY MEDICINE**

JP Hickey. *Faculty of Military Medicine of Ireland (FMMI), Dublin, Ireland*

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In July 2017 the Irish Medical Council formally recognised and accredited a new and innovative higher specialist training programme in Military Medicine. The development of this programme was a collaborative project between the Irish College of General Practitioners (ICGP) and the Faculty of Military Medicine Ireland (FMMI). It represents a marriage between the traditional vocational General Practice training pathway combined with a tranche of multi-faceted Military Medicine specific modules, including occupational medicine, designed to competently equip medical practitioners for military service at home and overseas. This dual-specialist training programme, a formal and recognised medical qualification encompassing Military Medicine and General Practice training, is the first of its kind anywhere in the world. This collaboration and the development of the training programme represent the very essence of innovation and forward-thinking in medical education. Military Medicine involved the coming together of a wide number of disparate groups and multi-organisational cooperation to bring this specialty from concept to reality. Through this presentation I will outline the journey from project foundation to specialty recognition leading to the induction of the first trainees onto the specialist training programme on the 10th of July 2017.

1706b **NAVAL SERVICE OPERATIONS IN THE MEDITERRANEAN: A MEDICAL BATTLEFIELD?**

A Geraghty. *Irish Naval Service, Haulbowline, Cork, Ireland*

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Since early 2015 the Irish state has been deploying Naval Ships to the Mediterranean to conduct humanitarian search and rescue operations in order to assist with the migrant crisis. Three ships are rotated per year and as of 23 Oct 2017, the Irish Naval Service have rescued 17 404 migrants, dealt with seventy-eight fatalities and delivered two babies onboard their ships. The scale of the operation is

unprecedented for any ship, as are the harsh realities of fatalities, and the shock of delivering a baby onboard a warship. In his presentation, Lt Cdr Geraghty provides an overview of the region, discusses the actors operating in the region. He then describes Irish Naval Service operations along with an overview of medical services provided. Finally, he presents four case studies where he describes: a typical day rescuing migrants, the delivery of a baby by an EMT, a mass casualty event where between 200 and 300 people drowned in front of a ship, and finally he describes how ship crews have to deal with decomposing bodies in sweltering heat. In his presentation Lt Cdr Geraghty argues that, as a battlefield is 'a place or situation of strife or conflict', Irish Naval Ships are operating in a medical battlefield. This unique working environment has presented many challenges to the occupational medicine service delivered to the crew of the Irish Naval Ships.

1666 **SENTINEL AND ALERT SYSTEMS IN OCCUPATIONAL MEDICINE (MODERNET)**

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Aim of special session Continuous changes in work are followed by the rise of new occupational health risks and possibly new work-related diseases, which remain difficult to detect and prevent. Hence, new agents are constantly being introduced at the workplace, with no clear assessment of long-term health risks. Consequently, the detection of new occupational risks requires specific additional instruments to those already in use for monitoring known work-related diseases. The method of choice might be influenced by the type of disease and its prevalence in the (risk) population. In the case of a rare disease with a high etiological fraction, spontaneous reporting by a large group of physicians or workers in a sentinel or alert system would be a good monitoring instrument. These alert systems can forecast and signal adverse effects on health, providing time for response in order to minimize their impact.

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1666a **OVERVIEW ON SENTINEL AND ALERT SYSTEMS IN OCCUPATIONAL MEDICINE**

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