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Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health

Title

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Permalink

<https://escholarship.org/uc/item/213504tp>

Journal

Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health, 27(5)

ISSN

1936-900X

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Publication Date

2026-09-25

DOI

10.5811/westjem.66623

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13 Downstream effects of armed conflict on civilian inter-hospital transfer

Evan Avraham Alpert, Ahmad Nama, Koby Assaf, Aliza Goldman, Maximilian Nerlander

Introduction: Inter-hospital transfers play a critical role in mass casualty events (MCE). On October 7, 2023, three thousand Hamas terrorists invaded Israel from Gaza, killing 1200 and injuring 1455, triggering an ongoing military conflict between Israel and Hamas. In routine times, Israel's smallest hospital, Yoseftal Medical Center (YMC) in Eilat, transfers complex patients to the closest tertiary care hospital, Soroka Medical Center (SMC) in Beersheva. Being the closest tertiary medical center to Gaza, SMC has also been receiving many of the combat casualties from the ongoing military conflict. The Gaza war initially resulted in a disruption of inter-hospital transfer patterns such that patients routinely transferred from YMC to SMC were sent to a further hospital, Hadassah Medical Center-Ein Kerem (HMC-EK) in Jerusalem. This article describes the downstream effects of armed conflict on inter-hospital transfers.

Methods: This is a retrospective study of all patients received at HMC-EK from YMC from January 1, 2022, through January 2, 2024. All data was retrieved from the HMC centralized administrative database.

Results: In the study period, 21 patients transferred from YMC to HMC, all arriving after October 7, 2023. The mean age was 61.8 years ($\pm$ 14.4 years) and 76.2% were male. Most (n=10, 47.6%) arrived in October with decreasing percentages in November (n=9, 42.9%) and December (n=2, 9.5%). The majority of patients received treatment from cardiology specialists (61.9%).

Conclusion: Inter-hospital transfers during an MCE or ongoing military conflict can impact the individual patient and the flow in a busy, chaotic ED. The transferred patient needs a higher level of care, which is unavailable at the local hospital. However, during an ongoing military conflict or disaster, the hospital where patients are usually transferred secondarily during routine times may be overwhelmed. Further research on the downstream effects of MCEs and disasters on inter-hospital transfers and ED utilization should be conducted, and protocols should be developed to improve patient care during these times.

14 Linking Personal Practices to Academic Success and Professional Development - A Qualitative Analysis

Sarah Petelinsek, Sarah Groves, Patrick G. Hughes, Megan Fix, Alyrene Dorey, Jorie Colbert-Getz

Background: Research on the success of medical students has mainly focused on academic measures such as

test scores and Grade Point Averages (1). However, success in medical school encompasses more than academics; it should also include professional identity formation (PIF) and overall wellness (2).

Methods: AY2023-24 first year medical students (N = 127) at the Spencer Fox Eccles School of Medicine-University of Utah, were asked for the top three habits that supported their academic success and the top three habits that contributed to PIF. Two researchers coded responses thematically, with a third researcher resolving any discrepancies.

Results: 123 students responded to the survey (97% response rate), yielding 737 habits. After excluding unclear responses, 655 habits were analyzed. Thematic analysis showed overlap between habits that promoted academic success and those that fostered PIF. The main themes included study strategies, personal skill development, professional growth, community involvement, and wellness. Among these, personal skill development, community development, and wellness were the most commonly cited for both academic and professional success.

Conclusion: The findings suggest that habits supporting academic success can also enhance PIF. By emphasizing wellness, community development, and personal skill growth, medical students can succeed both academically and professionally. This preliminary project aims to continue by studying the cohort longitudinally and comparing responses from students and faculty.

15 Rekindling Curiosity: Harnessing Autonomy and Creativity to Revitalize Physician Engagement

Maia Winkel, Al'ai Alvarez, Mia Karamatsu

Emergency clinicians are expected to move faster, see more patients, and reduce errors—often at the cost of their own well-being. The constant pressure can erode the sense of purpose that drew many into the field. This busy environment creates a culture of undervaluing brief but meaningful patient interactions that strengthen care and restore connection. Over time, skipping these moments does not just affect patient trust; it also damages clinicians' relationships outside of work and their sense of personal fulfillment.

When exploring what supports physician well-being and effectiveness, several key factors stand out. Autonomy in how we work fuels motivation and unlocks creativity. Introducing small moments of play or curiosity can make the day feel lighter. A beginner's mindset keeps us open and engaged. The sense of disconnection many physicians feel often stems from losing sight of why their work matters. Reconnecting with our core values can shift how we present ourselves and emphasize the need for intention, reflection, and space to stay connected