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## Risk Factors Affecting Controlled Whether or not Epilepsy in Epileptic Patients aged less than 18 years

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## Abstract

Abstract Preparing a hospital for a disaster is infinitely greater complex. Hospitals in most expansive populace centers are working at or close to full capacity. In numerous cities, healing centers and injury centers have issues, managing with a multiple-car thruway crash, much less the volume of patients likely to result from a large-scale accident. Amid crises, clinics can do a number of things to free up capacity and expand their assets. Studies demonstrate that the numbers of accessible beds, ventilators, confinement rooms, and pharmaceuticals may be efficient to care for casualties of a large-scale catastrophe. On the other hand, there are genuine physical impediments on this extension of their capabilities. The purpose of this research turned into to evaluate the information, hazard perception and mindset of the authorities, professionals, and employees at Greek hospitals to respond to terrorist attacks. A survey composed of 20 questions was being replied by 197 Healthcare Professionals and employees, using Google forms or tool in hard copy. However, numerous of the clinics do have at slightest a few of the basic components of readiness. Numerous of the healing centers do have archived and utilitarian readiness plans, give particular readiness education/training, and have fitting pharmaceutical strategies and supplies required within the occasion of an assault, including chemical or organic psychological militant operators. Tragically, agreeing to the answers of the participants most of healing centers might not increment their surge capacity or have symptomatic research facility administrations competent of analyzing, recognizing and confront biologic, chemical, nuclear, or explosive events.