

21 September 2000

# **Information circular**\*

To: Members of the staff

From: The Assistant Secretary-General for Human Resources Management

### Subject: Medical evacuation

1. The present information circular is issued pursuant to sections 2.6, 5.1, 10.1 and 10.3 (f) of administrative instruction ST/AI/2000/10.

2. Pursuant to section 2.6 of ST/AI/2000/10, the Guidelines for physicians advising on medical evacuation are outlined in annex I to the present circular.

3. Any inquiry related to medical evacuation can be addressed to the United Nations Medical Director at the following telephone and fax numbers:

Telephone: (212) 963-7082 during office hours; (212) 963-6666, through United Nations Security after working hours, on weekends and holidays;

Fax: (212) 963-4925

4. Pursuant to section 5.1 of ST/AI/2000/10, the list of recognized regional medical centres to which medical evacuation may be made from countries with inadequate medical facilities is provided in annex II to the present circular.

5. Pursuant to section 10.1 of ST/AI/2000/10, the medical evacuation form (MS.39) to be completed and submitted to the United Nations Medical Director is provided in annex III to the present circular. An electronic version of MS.39 will be made available upon request.

6. Pursuant to section 10.3 (f) of ST/AI/2000/10, heads of department or office shall, on a quarterly basis, provide the United Nations Medical Director with the total cost of each medical evacuation, including medical costs. Medical costs shall only be provided for staff members insured under the United Nations Medical Insurance Plan. Medical costs for staff members insured under Van Breda will be directly requested from Van Breda by the United Nations Medical Director.

<sup>\*</sup> The present circular will be in effect until further notice.

### Annex I

### Guidelines for physicians advising on medical evacuation

Beyond the typical acute life-threatening illness or injury, medical evacuation may be considered according to the following guidelines:

### A. The following chronic conditions with potential for lifethreatening outcomes or complications may be considered for medical evacuation:

Cancers

Complications of diabetes mellitus

Chronic cardiovascular diseases

Chronic pulmonary diseases

Chronic kidney diseases

Chronic liver diseases

Human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS)

Organ and bone marrow transplants

N.B. The above-mentioned conditions may require repeated medical evacuations.

# **B.** The following non-life-threatening chronic conditions are generally not considered for medical evacuation:

Chronic eye conditions

Chronic ear, nose and throat/allergy conditions

Chronic back pains, osteoarthritis

Chronic gastrointestinal ailments

Chronic urological conditions

Chronic skin conditions

Any request in this category **must** be submitted for review to the United Nations Medical Director before any action is taken.

### C. The following conditions do not qualify for medical evacuation:

Infertility treatments

Plastic surgeries (unless in the context of disfigurement)

Orthodontic treatments

All chronic/congenital medical conditions that are stable and non-life-threatening

# Annex II

# Countries with inadequate medical facilities justifying medical evacuation to recognized regional medical centres

Countries	Recognized regional medical centres
A. Central America	
Belize, El Salvador, Honduras, Nicaragua	Mexico
B. South America	
Bolivia	Chile
Guyana	Trinidad and Tobago and Venezuela
C. Caribbean	
Haiti	Dominican Republic
D. Arab States	
Iraq Libyan Arab Jamahiriya Yemen	Jordan, Lebanon Egypt, Tunisia Egypt, Saudi Arabia
E. Africa	
Benin Burkina Faso Cape Verde Central African Republic Chad Congo Democratic Republic of the Congo Equatorial Guinea Gambia Ghana Guinea Guinea Guinea-Bissau Liberia Mali Mauritania Niger Sao Tome and Principe Sierra Leone Togo	Cameroon Côte d'Ivoire Gabon Senegal South Africa

Co	untries	Recognized regional medical centres
	Burundi Djibouti Eritrea Ethiopia Rwanda Somalia Sudan Uganda United Republic of Tanzania Angola Botswana	Egypt Kenya South Africa
	Lesotho Malawi Mozambique Swaziland Zambia	South Africa
	Comoros Madagascar	Île de la Réunion
F.	Asia	
	Armenia Azerbaijan Georgia Kyrgyzstan	Turkey
	Afghanistan Bangladesh Bhutan Kazakhstan Nepal Turkmenistan Uzbekistan	India, Pakistan
	Maldives	India, Sri Lanka
	Cambodia Lao People's Democratic Republic Myanmar Viet Nam	Thailand
	Democratic People's Republic of Korea Mongolia	China
G.	Micronesia and Melanesia	
	All countries	Australia, New Zealand

# Annex III

### MEDICAL EVACUATION FORM To be faxed, or sent to the United Nations Medical Director Fax No. (212) 963-4925

### PART A: TO BE COMPLETED BY THE MEDICAL OFFICER, THE UNITED NATIONS DISPENSARY PHYSICIAN OR UNITED NATIONS EXAMINING PHYSICIAN RECOMMENDING MEDICAL EVACUATION

Duty station:	Country:		
Name of evacuee:	Date of bir	th: (d/m/y)	
If evacuee is not the staff member, na	ame of staff member:		
Index No.:	Agency/Or	ganization:	
Diagnosis:			
Reasons for recommending medical e	evacuation (if necessary, a	attach additional sheet):	
Is the evacuee travelling alone?  Yes No			
If not, who is accompanying  the evacuee?	Doctor 🗌 Nurse	Family member	Donor
Place of evacuation recommended:			
Expected duration of medical evacua	tion:		
Name of physician:			
Date: (d/m/y)	Signature:		

#### PART B: TO BE COMPLETED BY THE MEDICAL SERVICES DIVISION UPON RECEIPT OF THE MEDICAL REPORT ISSUED BY THE ATTENDING PHYSICIAN AT THE PLACE OF EVACUATION

Medical report received on:	Final diagnosis:
Actual place of evacuation:	·
Departure date: (d/m/y)	Return date: (d/m/y)
Hospitalization – Admitted on: (d/m/y)	Discharged on: (d/m/y)

MS.39 (5-00)-E