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Hotline for COVID-19 Patients and Problem of Communication in Pandemic: A Short Note

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Abstract

COVID-19 pandemic is an important global problem. During pandemic, management of infected person is usually difficult. When there is a rapid increasing incidences, there might be insufficient health care facilities. Some patients have to wait and the communication via hotline might be used. However, there are also emerging problem of hotline communication. Here, the authors discuss on hotline for COVID-19 patients and problem of communication in pandemic with referencing case studies from an Indochina country.

Keywords: COVID-19, Hotline, Communication, Problem.

Introduction

COVID-19 pandemic is an important global problem. During pandemic, management of infected person is usually difficult. When there is a rapid increasing incidences, there might be insufficient health care facilities. Some patients have to wait and the communication via hotline might be used. However, there are also emerging problem of hotline communication. Here, the authors discuss on hotline for COVID-19 patients and problem of communication in pandemic with referencing case studies from an Indochina country.

Case studies

a. Very old lady waiting for ambulance at home until death

When a group of old ladies, 3 sisters, were diagnosed for COVID-19, they were told to wait a home. However, they waited for a very long time and there was no communication from the hospital. They tried to use hotline phone call for help but it did not work. Finally, one of the three infected old ladies that home died and thee story became the ig local news.

b. Disguising a rescue team to send an ambulance for carrying a disguised COVID-19 case to the hospital

One in a house called to emergency line for asking for ambulance transfer of a bed ridden patient to the hospital. The rescue team went to the house carrying the case to the hospital. At first see, the rescue team asked whether anyone in the house including to the patient had COVID-19 or not

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and all replied no. However, when ambulance arrived hospital, the cousin of the patient reported that the patient had COVID-19. The rescue team became COVID-19 contact group and had to be isolated for 2 weeks. Further history taking revealed that cousin of the bed ridden COVID-19 case at home tried several times to communicate via hotline and called for help. However, there is no response. Hence, the cousin used the trick for calling another non COVID-19 rescue service for help. This is an actual illegal practice and became a local big news.

Discussion

During pandemic, several problems on hotline communication might occur [1]. Due to lack of sufficient communication port, there might be difficulty in communication. In some cases, the infected elderly might live alone and the inability for communication might occur. The waiting for ambulance transfer from house to hospital might be very long and this is an actual problem on good pandemic management.

Due to the frustrating situation, someone might use a trick for lure a rescue team to carry a COVID-19 case to the hospital and it might result in a large group of contact person in rescue team. Although there might be a law for punishment on disguising on COVID-19 status, it is better to have a good hotline communication system and verification for safe transportation of COVID-19 case from home to hospital. Disguising of history of COVID-19 or COVID-19 contact is not uncommon during pandemic and the problem has to be well managed by a good communication system [2].

Conflict of interest: None

References

- 1. Wang J, Wei H, Zhou L. Hotline services in China during COVID-19 pandemic. J Affect Disord. 2020 Oct 1; 275: 125-126.
- 2. Joob B, Wiwanitkit V. Patients with COVID-19 and disguising on travel history: A challenge in disease screening. Int J Prev Med 2020; 11: 46.