The Impact of Student Hotspotting on Patients & the Jefferson Health System

Mishael Khan, BS  
*Thomas Jefferson University, mishael.khan@jefferson.edu*

Lauren Collins, MD  
*Thomas Jefferson University, Lauren.Collins@jefferson.edu*

Shoshana Sicks, EdM  
*Thomas Jefferson University, shoshana.sicks@jefferson.edu*

Richard Hass, PhD  
*Thomas Jefferson University, richard.hass@jefferson.edu*

Tracey Vause Earland, PhD, OTR/L  
*Thomas Jefferson University, Tracey.Earland@jefferson.edu*

See next page for additional authors

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Authors
Mishael Khan, BS; Lauren Collins, MD; Shoshana Sicks, EdM; Richard Hass, PhD; Tracey Vaue Earland, PhD, OTR/L; Courtney Newsome, BA; and Sara Cohen, OTS
A SYSTEMATIC REVIEW OF CLINICAL OUTCOMES IN HELMETED
MOTORCYCLE INJURIES IN LOW AND MIDDLE-INCOME COUNTRIES

Injuries due to road traffic accidents account for over 1 million deaths annually, of which
90% disproportionately occur in low and middle-income countries (LMICs). In their current
design, motorcycle helmets notably improve patient outcomes, reducing the risk of crash-related
TBI by 69% and death by 42%. The data we currently have does not thoroughly document the
large burden of road traffic injuries in LMICs, and thus we must identify what specific clinical
outcomes have been documented in relation to helmeted accidents in LMICs. Collection of
clinical outcomes data can serve as the evidence-based framework needed for future injury
prevention efforts. Using PRISMA guidelines, we collected 415 articles from PubMed, Embase,
Scopus, Web of Science, and Transportation Research International Documentation (TRID)
databases related to motorcycles, clinical outcomes, and LMICs with set inclusion and exclusion
criteria such as articles written in the English language and use of “motor vehicle accidents” and
other non-specific terms. These were then reviewed by two independent reviewers and a third
reviewer as needed to resolve disagreements. Results will be stratified by World Bank country
income designation of low, middle, or high income and then analyzed for significant differences.
We anticipate that clinical outcomes in two-wheeled motorcycle accidents will vary widely
among countries of different income stratifications. In conclusion, these results suggest that
safety interventions such as modified helmet design are needed to reduce traumatic head and
neck injuries in motorcycle accidents, particularly in LMICs.