

Reducing the communication and overhead for abetted life expectancy

A.SARANYA, M.JINI PRITHA
Assistant Professor
KSR College of arts and science for women
Tiruchengode

Abstract— The outlay of emergency situations is delivered in grueling situations .Human beings had to lead pathetic life in real-time. Individually each and every people has to meet accidents in daily life. Catastrophic events in remote place has lead the people to acquire the medical facilities from near by towns, cities and district. Datacenter especially the health care where dataset consisting of information about ambulance has been maintained .During industrial accidents, mistakes or disasters populate can benefit by using health care .Ambulance can be send to the locality based on the distance of remote area. If the intimated ambulance is working the datacenter can be refer to another nearby ambulance .After reaching the locality the people are taken to hospital for further treatment.

Keywords: Catastrophic events, Health-care center(Datacenter),Ambulance, Accidental Zone

I. INTRODUCTION

Accidents are unintentional happening in life which sometime lead to heartbreaking stipulation. Accidents may happen physically or non physically, activity, vehicle. Physical events are touchable events happens without the knowledge of populate by munitions. Non –physical accidents happen by forgetting something which is necessary for their daily life. Activity accidents are work accidents at work places during construction of buildings, dams or industries.Vehicle accidents are due to stoppage or breakdown during test drive or emergency situations.

1.1 WIRELESS NETWORKS

Wireless network uses radio wave for transmitting information from sender to receiver. Wireless network can access and share the resources within the specified range. The cost of cabling and quality of data transfer is mended by protocol and security mechanism

1.2AMBIENT AND ASSISTED LIVING

Ambulance is a carriage of poorly to hospital during crisis. It consist of doctors, nurses for resuscitation. Road accidents caused by dense traffic has become amusing situation for human beings.

The assistance has to provided by nearby hospitals or locality. They are not ready to help the people in pathetic situations. A remedy to this to maintain a database which has details about ambulance (private or public). During of emergency message is sent to ambulance based on their location which are nearest to location.



Figure 1: Accident Zone-Waiting for ambulance service

II SYSTEM DESIGN

In database or health care center which contain information about regarding availability of ambulance to public in accident zone. The message can be send depending upon the distance of the accident zone and taken to nearby hospital for remedial measures

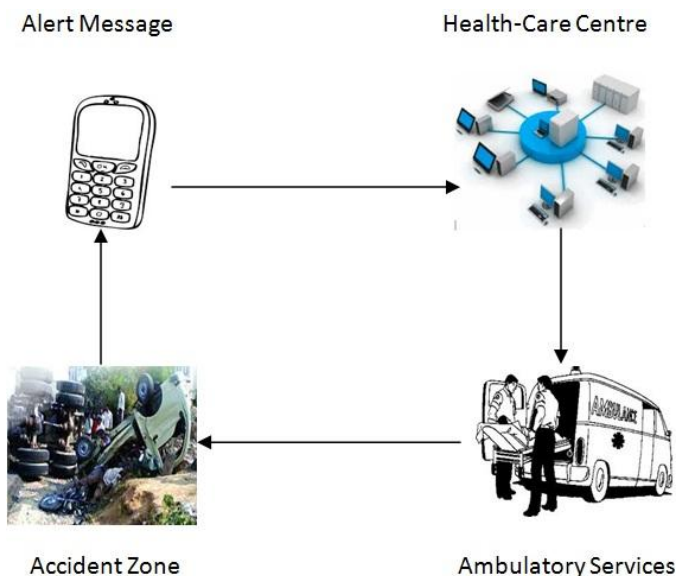


Figure 2: Block Diagram

III IMPLEMENTATION

Ambulatory service provides treatment using medical technologies to patients during discrepancies . Improves health conditions where appropriate ambulatory care prevents or reduces the need for hospital admission .

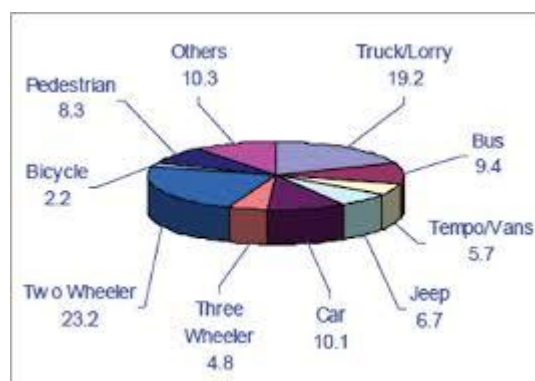
Medical reconnaissance and therapy for illness and preventive health measures is based on ambulatory basis which includes minor surgery and ways and means, most types of dental services, dermatology services, and produce medical reports for medical test such as blood test and telephone consultations.Ambulatory services contributes to decrease hospital expenditures in most developing countries.



Figure 3: Ambulatory Service

IV BENEFITS OF ACCIDENTAL DATA AND DEPLOYMENT

Road accidents are erratic and regularly published by all countries which involves a physical, non-physical, vehicle and activity lose their life in accidents .



Figure

4: Graphical representation of road accidents

People should have the knowledge of using vehicle and handling electronic gadgets in domestic environment which tolles the death rate.

Children below the age of eighteen should not be allowed to handle automobiles without the presence of guardian. Granting LLR(Learners License Rule) to students studying at educational institutes should be banned.

Ingenuous behavior of students lead to many number of accidents without knowing the value of life

Age	Ownership of Motorcycles by Age Group		
	Year		
	1990	1998	2003
Under 18	8.3%	4.1%	3.7%
18 – 24	15.5%	10.6%	10.8%
25 – 29	17.1%	10.9%	7.6%
30 – 34	16.4%	11.5%	8.9%
35 – 39	14.3%	16.0%	10.4%
40 – 49	16.3%	24.6%	27.9%
50 and Over	10.1%	19.1%	25.1%
Not Stated	2.0%	3.2%	5.6%
Median Age	32.0 Years	38.0 Years	41.0 Years
Mean Age	33.1 Years	38.1 Years	40.2 Years

Figure 5: Statistical analysis of vehicles

V. CONCLUSION

Interrelated challenges facing ambulatory service practice are develop business models, determining which services are valuable services. Ambulatory services pharmacy practitioners must promote medication use, provide patient-centered care, pursue and seek appropriate recognition and compensation for the services they provide. To be fully effective, national initiatives for improving the quality of health care must penetrate the work of individual health care practitioners, including ambulatory care pharmacy.

VI. FUTURE ENHACEMENT

Health-system-based service with the mission and operations of the institution, and how to help the institution meet its challenges related to quality improvement, continuity of care, and financial sustainability.

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