

# Health Response to the Situation in Deir-ez-Zor

Report of a WHO assessment



SEPTEMBER 2017



World Health  
Organization

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# EXECUTIVE SUMMARY

Large swathes of the northern Syrian governorate of Deir-ez-Zor have been under the control of the Islamic State of Iraq and the Levant (ISIL) since mid-2014. On 5 September 2017, the Government of Syria (GoS) and allied forces broke ISIL's three-year siege on the government-held parts of the governorate's capital city, also called Deir-ez-Zor. ISIL is becoming increasingly isolated as the GoS and allied forces advance on several fronts towards ISIL-held territory in the governorate, and the Syrian Democratic Forces (SDF), backed by the US-led coalition, advance from the north. The intensity of clashes and airstrikes continues to result in civilian casualties, large numbers of internally displaced people (IDPs), and damaged or destroyed infrastructures including health care facilities.

In light of the increasing conflict and the rising health needs in the governorate, a WHO team comprising an external trauma care specialist, a WCO trauma specialist and other staff met with UN partners, nongovernmental organizations (NGOs), the Ministry of Health (MoH), the Syrian Arab Red Crescent (SARC) and the International Committee of the Red Cross (ICRC) in Damascus in early September 2017. The purpose of the meeting was to assess the availability and accessibility of trauma and specialized care for wounded and critically ill patients in Deir-ez-Zor governorate. (Security constraints meant the team was not able to visit the governorate to assess the situation at first hand.) The present report, based on information gathered during the meeting, describes:

1. The current health situation in Deir-ez-Zor (available health care services, geographical coverage and status of functionality of health care facilities).
2. Recommendations for optimal response modalities, including referral pathways for wounded and critically ill patients.

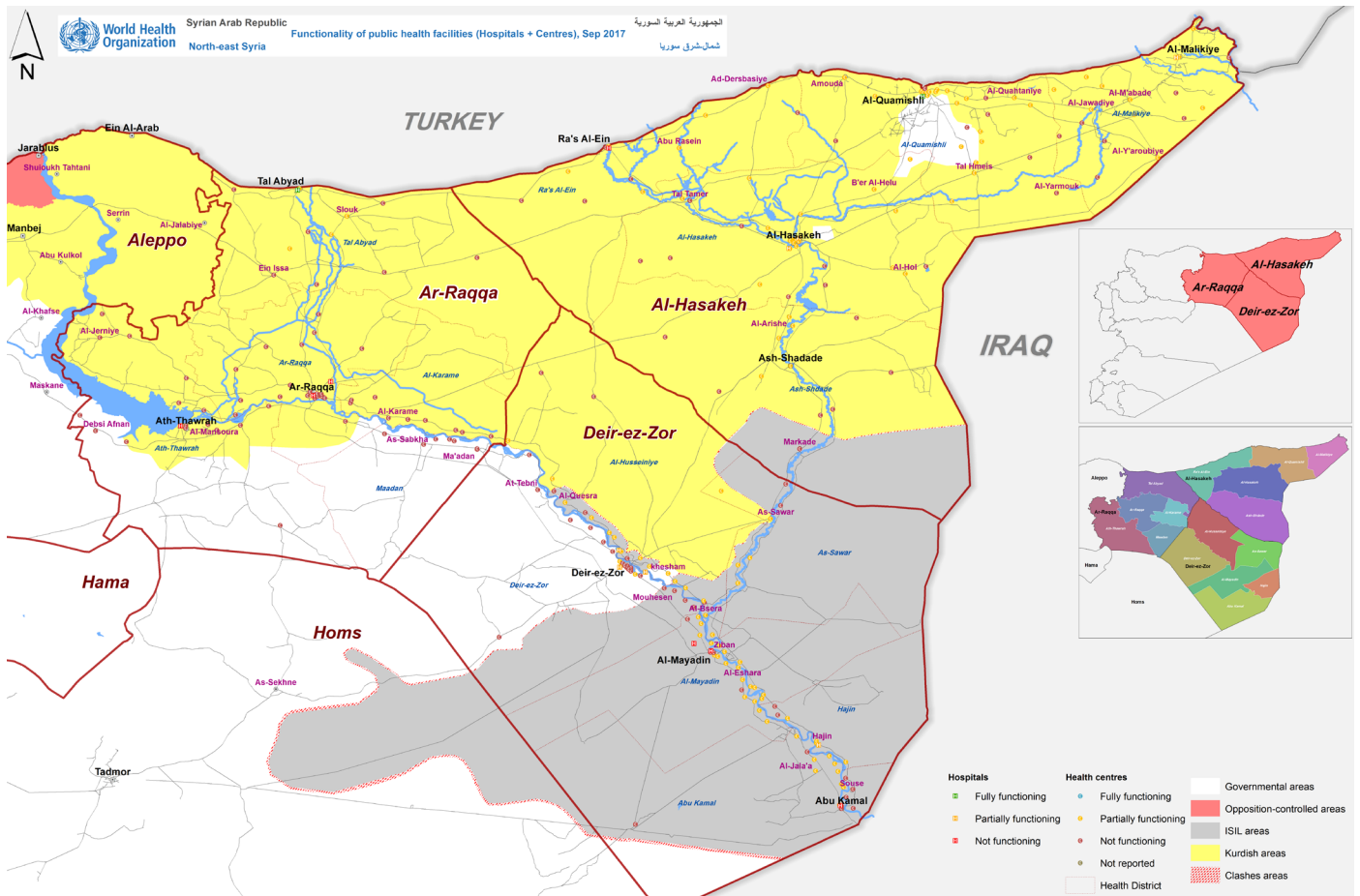
The main findings and recommendations from the Damascus meeting are summarized below:

## Findings

1. Health care services in Deir-ez-Zor have been severely disrupted due to ISIL's long siege and the ongoing military campaign. This has resulted in massive population displacements and badly damaged health care facilities.
2. Currently, Al-Assad hospital is the only working government hospital in the city of Deir-ez-Zor. The city can now be reached by road from Damascus.
3. None of the four government hospitals in the southern cities of Deir-ez-Zor governorate is working.
4. Injured civilians in the ISIL-controlled Al-Quesra area north of Deir-ez-Zor may need to be evacuated to either Al-Hassakeh, Qamishli or Ras el Ain.
5. There are no agencies on the ground operating either directly or through national or international NGOs to support primary and secondary health care services.
6. Although high numbers of trauma cases or patients requiring emergency health care are expected, there are no established modalities for triaging or treating wounded patients, and the resources to do so are almost non-existent.

## Recommendations

1. Provide immediate support to Al-Assad hospital by donating critical equipment and sufficient trauma kits to treat 2000 patients.
2. Organize viable evacuation pathways for wounded patients in Deir-ez-Zor.
3. Donate 10 ambulances to Deir-ez-Zor governorate.
4. Draw up plans to establish trauma stabilization points (TSPs) south of Deir-ez-Zor along the Euphrates River as ISIL forces withdraw.
5. Draw up plans to 1) establish a field hospital with ambulances in the southern part of the Euphrates (e.g., Abu Kamal or Hajin), and 2) set up TSPs north of Abu Kamal when possible.
6. Establish modalities for evacuating patients from type 2 to type 3 facilities based on WHO's EMT Initiative (see page 6 of this report).
7. Identify private or public hospitals in the area that can receive patients from Al-Assad hospital.
8. Increase capacity to evacuate patients by air or road to Damascus and Aleppo for tertiary treatment.
9. Identify and secure land routes to bring supplies and equipment into the area.
10. Plan to establish TSPs in the Al-Quesra area to evacuate patients to Al-Hassakeh.
11. Secure safe supplies of blood, oxygen and electricity for health care facilities and distribute kits to test blood and blood products.



## BACKGROUND

Under the control of ISIL, the people of Deir-ez-Zor have been subjected to sustained deprivation, restrictions on humanitarian access and gross human rights violations. More than 1 077 000 civilians, of whom approximately 15% are IDPs, are estimated to remain in the governorate.

Although markets have generally continued to function in the non-besieged areas of the governorate, the conflict, inflated prices and access restrictions have limited civilians' ability to meet essential needs. Basic health and water and sanitation services are functioning, albeit at greatly reduced capacity. Declining productivity in the agricultural and other industries has severely reduced livelihood opportunities.

The situation is much bleaker in the areas controlled by ISIL. Civilians have been prohibited from leaving these areas. Those who attempt to flee by unauthorized routes face the risk of harassment, arrest, landmines, snipers and forced conscription. Women are barred from travelling without a male relative, and routinely face intense questioning or harassment, even when accompanied. ISIL has established mobile checkpoints in the countryside to prevent people from escaping. Despite this, over 2500 families in rural areas of Deir-ez-Zor reportedly fled to Al-Hassakeh governorate in late August 2017 as the SDF advanced.

ISIL is becoming increasingly isolated as the GoS and allied forces and the SDF advance towards Deir-ez-Zor on several fronts. On 5 September 2017, the GoS broke ISIL's three-year siege on the government-held parts of Deir-ez-Zor city. The situation on the ground remains volatile, however, and the increased intensity of clashes and airstrikes against ISIL continues to result in civilian casualties. Although commercial activity has reportedly restarted following the lifting of the siege, conditions in the city are dire due to severely damaged water and sewage systems and accumulated waste in open areas. Many people are suffering from malnutrition, and patients with chronic diseases have been unable to obtain life-saving treatment.



## Displacement trends

The number of IDPs in north-east Syria is rising. Since the onset of the Ar-Raqqa offensive in November 2016, 289 901 people have been displaced, many of them more than once. Over 51 000 people have been displaced since 1 July 2017 alone<sup>1</sup>.

IDPs in northern Syria are being accommodated in camps in Ar-Raqqa and Al-Hassakeh governorates. Most IDPs from Deir-ez-Zor are being received at Areeshah (Bahra) transit site, which was established by local authorities in June 2017. The humanitarian community continues to raise protection concerns and advocate with local authorities for the freedom of movement of IDPs.

Based on the latest OCHA situation report on the North east (August 2017), displacement from Deir-ez-Zor governorate continues to be hazardous and vulnerable populations (women, children, elderly) are most at risk during displacement.

ISIL has established many checkpoints in the western countryside of Deir-ez-Zor to prevent people from escaping to SDF-controlled areas. The following unconfirmed reports summarize the men, women and children killed and injured by exploding landmines, or shot while attempting to flee:

- On 16 August 2017, a man and child travelling to SDF-controlled areas died following a mine explosion in Upper Baqras. On the same day, eight people were reportedly shot and killed and another 13 (mainly women and children) were injured while trying to cross a checkpoint.
- On 19 August 2017, ISIL shot five civilians who were attempting to escape.
- On 27 August 2017, at least 12 people were injured by landmines on the road from Deir-ez-Zor to Al-Hassakeh.
- On 28 August 2017, two families from Kasra were caught up in a mine explosion that killed one woman and seriously injured five others.
- On 30 August 2017, 12 people were killed and 28 others were injured by landmines in Abu Khashab village (Al-Hassakeh).
- On 31 August 2017, one man was killed following a mine explosion in the Abu Khashab area.

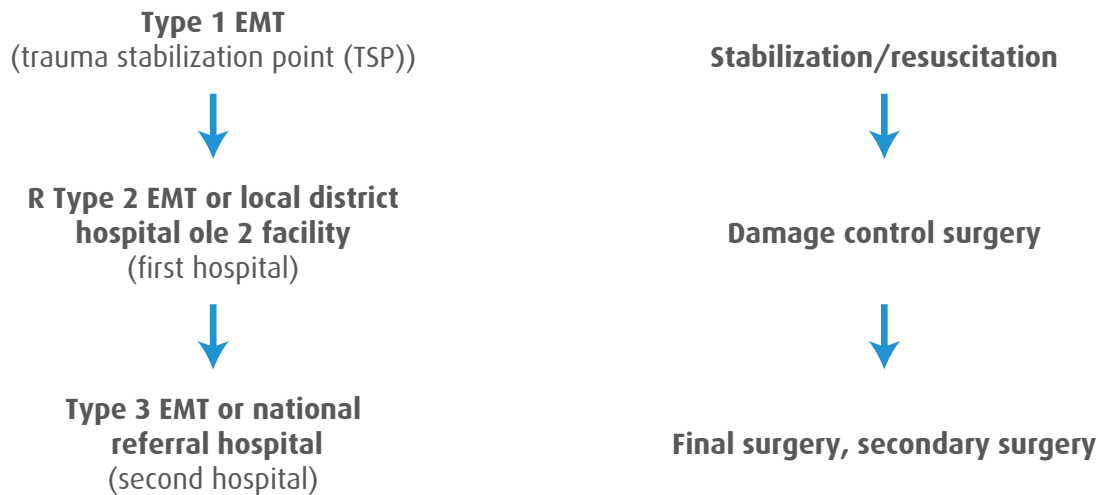


<sup>1</sup> Figures from the Camp Coordination and Camp Management (CCM) cluster since 1 July 2017

# TRAUMA CARE IN NORTHERN SYRIA

## WHO's Emergency Medical Teams (EMT) Initiative:

According to international standards, life-saving first aid should be available within minutes and more advanced resuscitation techniques within less than one hour.



Where the capacity for advanced first aid among the population is low, it is essential to establish TSPs where patients can access both life-saving first aid and advanced resuscitation as soon as possible.

Damage control surgery in a Type 2 hospital should be available within one to two hours of a patient being injured. For most patients, damage control surgery will also be the final surgery. In Syria, surgical services in Type 2 hospitals should be based upon the existing public and private hospitals in the region.

Type 2 facilities close to frontlines must be decompressed to enable them to admit new patients. Options for referral in the Syrian context must include an element of coordination and triage of needs. Patients requiring ongoing general wound care and basic rehabilitation can be moved to either non-acute sections of existing facilities or to nearby hospitals, while those requiring complex trauma care and rehabilitation should be transferred to specialist centres in Damascus or Aleppo (Type 3 or referral hospitals).



The handling of injured patients (for purposes of prioritizing transport and selecting the appropriate referral health care facility) should be based on the following triage principles where patients are classified into four categories:

**Code red. Seriously wounded patients who need surgery as soon as possible**

- Airway: Injuries such as burns or penetrating injuries to the face: airway may need to be secured, e.g., by endotracheal intubation or tracheostomy.
- Breathing: Tension pneumothorax or suspicion of a major hemothorax.
- Control of bleeding and circulation: Internal bleeding (chest, abdomen, pelvis) or injuries to major vessels of the extremities.
- Traumatic amputation.

**Code yellow. Seriously wounded patients who need, but can wait for, surgery (within 6 hours)**

- Penetrating abdominal injury without any signs of internal bleeding, patient is circulatory stable but may have an injury to stomach and/or bowels.
- Penetrating head injuries but patient remains conscious, (Glasgow Coma Scale (GCS) >8) and can maintain their airway. When endotracheal intubation or tracheostomy is necessary, the patient will be classified as code red provided respiratory support is available during transport and at arrival.
- Compound fractures.
- Major soft tissue wounds or a large number of wounds.

**Code green. Superficially wounded patients who can be treated through ambulatory care.**

- Patients with superficial wounds who do not need immediate hospitalization or surgery requiring general anaesthesia.
- These patients, often called “the walking wounded”, frequently present wounds that can be treated under local anaesthesia, followed by hospital treatment at a later stage.

**Code black. Patients who are dying.**

## Challenges

In north-east Syria, a recent similar assessment in Ar Raqqa governorate showed that the few TSPs that were functioning were all located near Ar-Raqqa city. This means that for civilians injured in other locations, first aid is available either too late or not at all. Most trauma patients seeking treatment at hospitals in the neighbouring governorate of Al-Hassakeh arrive in private cars without receiving prior first aid; many of them die en route. Hospitals near the main conflict zones report that there has been no significant increase in the number of admissions. This lends weight to the supposition that many patients have no access to life-saving first aid or stabilization techniques, and thus die before reaching hospitals. Extrapolating from the situation in Ar-Raqqa, the main challenges in Deir-ez-Zor include:

- Distances/travel times of more than four hours, compounded by a shortage of health care facilities on the eastern side of the Euphrates river to stabilize patients and increase their chances of surviving their journey.
- Insecurity and shifting frontlines, with a high likelihood of soldiers at checkpoints delaying ambulance transfers or even refusing access.
- Lack of ambulance services on the eastern side of the river. Ambulances bearing the ICRC or WHO logos would probably secure faster evacuation.
- Heavily mined areas, particularly between As-Sawar and Markade.

# SITUATION ASSESSMENT

## Health care resources in Deir-ez-Zor governorate

### Primary health care centres

There are 103 primary health care centres in the governorate:

- 98 general PHC centres in five districts (24 in Deir-ez-Zor; 21 in Al-Husseiniye; 16 in Abu Kamal; 7 in Hajin; 23 in Al-Mayadin; 7 in As-Sawar).
- Two comprehensive polyclinics and 1 specialist centre for tuberculosis in Deir-ez-Zor city.
- 1 specialist schistosomiasis clinic in Abu Kamal.
- 1 specialist schistosomiasis clinic in Al-Mayadin.

Only 59 of the above centres are partially functioning while the remaining 44 are not functioning. This latter category includes the polyclinics and specialized facilities, and 14 PHC centres that have been reported as fully damaged.

### Specialized health care centres

There are seven national and 18 private hospitals in the governorate:

- Three in Deir-ez-Zor city (Al-Assad hospital, Children and Obstetrics hospital, and Al Furat hospital). The latter two hospitals have been destroyed and their staff have been redeployed to Al Assad Hospital.
- Two in Al Mayadin city (Al Mayadin hospital and the Modern Medicine hospital). Both are under ISIL control.
- One in Abu Kamal (Al-Bassel-Abu Kamal hospital, under ISIL control).
- One in Hajin (Hajin hospital, under ISIL control).
- 18 private hospitals under ISIL control. (See Annex 1.)

### Health care facilities in Deir-ez-Zor city

Al-Assad hospital (about 2 km from the city centre) is a critical asset, since it is the sole hospital that is functioning, albeit only partially. Health care staff and medical equipment from the other two city hospitals have been redeployed to Al-Assad hospital. The departments of internal medicine, paediatrics and surgery are still working.

The third and fourth floors are damaged, but the emergency room, operating theatres and main medical wards appear to be functional. The hospital's original 500-bed capacity has been reduced by half, its CT scanner is out of order, and it has only one ambulance.

Five functioning health care centres in the city provide most of its health care services (Khalid Ibn Al Waleed Centre, Al Thawra Centre, Al Qusour Centre, Al Dahiyah Centre, and the Syrian Arab Red Crescent Centre).

Most health care facilities in the part of the city that was under the control of ISIL have been destroyed. They include two hospitals<sup>2</sup> and all health care centres. There is one functioning field hospital (Pharmex hospital). Around 15 000 people are estimated to live in the part of the city that was under ISIL control.

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<sup>2</sup> The Euphrates hospital and the Children's hospital



## Health care facilities in ISIL-controlled parts of rural Deir-ez-Zor governorate

### Al-Mayadin

Al-Tib Al-Hadith public hospital has been partially destroyed and is out of service. There is ongoing heavy bombing of the city, increasing the likelihood of further damage to existing health facilities before the town becomes fully accessible. Existing private hospitals include:

- Nuri El Said Hospital: provides general, internal, thoracic and pelvic surgery; has one operating theatre with doctors on call.
- Al Qahtan Hospital for Surgical Services: under ISIL management. Provides outpatient and surgical services.
- Al Hammad Hospital: under ISIL management. Provides surgical and emergency services.
- Al Zainab Hospital: under ISIL management. Specializes in paediatrics and has a special section for incubators as well as a dialysis department.
- Al Salam Hospital: provides surgery and outpatient clinics.
- Al Khair Hospital: owned by ISIL. Provides surgical services and outpatient clinics at half the normal rate.

Functioning health care facilities (outpatient clinics, paediatric care, internal medicine and vaccination services) include Al Awal centre, as well as Al Qariya, Al-Ashara and Al-Dweir health care centres. The city has a specialist radial imaging centre with a functioning MRI machine and CT scanner.

### Abu – Kamal city:

The Al Basel national hospital has been destroyed and there are no other functioning public hospitals in the city. The city is experiencing heavy bombing, increasing the likelihood of further damage to existing health facilities before the town becomes fully accessible. Existing private hospitals include:

- Aisha hospital (one of the largest private hospitals in the city): has come under attack twice (in 2015 and 2017), but remains functional.
- Al Hana hospital consisting of two floors and a basement.
- Al Zubair, a one-storey hospital
- Al Tawfiq, a one-storey hospital.

The table below contains more information on the status of staff and services in each of these private hospitals

Private hospitals in Abu Kamal	Available resources and services
Aisha hospital	<ul style="list-style-type: none"> <li>• Outpatient clinic services</li> <li>• Obstetrics and gynaecology wards</li> <li>• Four male and two female doctors, four midwives</li> <li>• Five paediatricians and four incubators</li> <li>• Department of orthopaedics with three doctors</li> <li>• Intensive care unit</li> <li>• Cardiology department</li> <li>• Round-the-clock emergency department with three general physicians and one emergency doctor</li> <li>• Four operating theatres</li> <li>• One clinical laboratory</li> <li>• Radiology department with a CT scanner</li> </ul>
Al Hana hospital	<ul style="list-style-type: none"> <li>• Surgical and obstetric services</li> <li>• One operating theatre</li> <li>• Two internists, one cardiologist, one gynaecologist, one urologist, and one general surgeon</li> </ul>
Al Zubair hospital	<ul style="list-style-type: none"> <li>• Surgical services</li> <li>• One operating theatre</li> <li>• Three surgeons and one internist</li> </ul>
Al Tawfiq hospital	<ul style="list-style-type: none"> <li>• Surgical and gynaecological services</li> <li>• One operating theatre</li> <li>• A small number of medical staff</li> </ul>

Functioning health care centres<sup>3</sup> in Abu Kamal include Al-Hilal Centre (also called Al-Khansaa or Al-Fateh Centre), Al Jalaa, Al Salheya, Al Hasrat, As-Syyal, Al Mattarda, Ar-Ramadi and Al Ghubra. The town also has a private X-ray centre with ultrasound facilities.

#### Hajin area

Hajin hospital provides only outpatient services and has three internal medicine, general and paediatric doctors. Nabd El Hayat private hospital provides outpatient services and is staffed with one internal medicine specialist and two female doctors.

#### Subakhan area

Subkhan private hospital provides surgical, paediatric and outpatient clinic services. Staff includes general surgeons, a paediatrician and an internist.

#### Al-Qesra area

Al Qesra Hospital was built by the MoH but bombed before its official opening. It was partially rehabilitated in 2014, and now provides outpatient and emergency services. However, there are reports that this hospital was destroyed recently and all its equipment was removed by ISIL.

#### Al Sawar area

Al Zayanat private hospital provides outpatient services. One health care centre provides vaccination services.

### Medical evacuation resources

There are only two ambulances in Deir-ez-Zor. The MoH has provided one additional ambulance and one mobile clinic, and two more are in the pipeline. The SARC and the ICRC are also donating two ambulances to Deir-ez-Zor.

### Health situation

- High numbers of patients with traumatic and burn-related injuries.
- Lack of clean water leading to an increased risk of waterborne diseases.
- Patients with neglected chronic diseases.
- Rising rates of malnutrition.

### Possible population movements

People are fleeing the military offensive. The GoS and allied forces are attacking from the west and the SDF and US-led coalition forces are attacking from the north. The main stream of refugees has been along the Euphrates river, in a south-east direction. Evacuating patients to Kurdish-controlled areas in the north would be costly and dangerous. It is estimated that only 5% of IDPs from Deir-ez-Zor and south of the city will go north.

### Situation in the north-east

SDF and US-led coalition forces in the north-east are moving to central Deir-ez-Zor, leaving ISIL confined to an enclave. Evacuation from this area will probably be north towards Al-Hassakeh and Qamishli.

### Situation in the south-east

There are reports that the GoS and allied forces are crossing the Euphrates river and moving south following the banks of the river. Patients in this area will have to be referred to Al-Assad hospital in Deir-ez-Zor city for treatment, since all four hospitals in the southern cities are out of action. Other GoS and allied forces are converging on Abu Kamal near the border with Iraq, where they will meet up with Iraqi government forces. Patients in this area will be effectively trapped, with no possibility of being evacuated for treatment. They will have to be treated at private hospitals in the area.

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<sup>3</sup> Outpatient clinics providing all or some of the following services: paediatric care, internal medicine, vaccination services.

# RECOMMENDED ACTIONS

## 1. Enhance capacity of Al-Assad hospital

Responsibility: Syrian MOH in collaboration with WHO and other donors.

1. Dispatch trauma and surgical supplies, including operating theatre tables and lights, in the first UN convoy into Deir-ez-Zor for delivery to Al-Assad Hospital.
2. Repair or replace the hospital's oxygen generator. This will allow it to refill oxygen cylinders used in ambulances and other health care facilities.
3. Assess the hospital's generator capacity and if required donate an additional generator to ensure sufficient power.
4. Provide supplies and equipment including trauma kits to treat 2000 injured patients, half of whom are likely to require major surgery.
5. Repair or replace the hospital's CT scanner.
6. Assess training needs of hospital staff, especially in trauma care and the management of mass casualty incidents. (NB No additional staff are required for as long as all staff from the two other city hospitals in the city remain at Al-Assad hospital.)

## 2. Organize evacuation pathways for wounded patients in and around Deir-ez-Zor

Responsibility: SARC/ICRC and eventually the MOH and WHO.

1. Procure additional ambulances (two are on their way; 7-8 more are required).
2. Establish TSPs as the frontline of the conflict moves south, away from Al-Assad hospital.

## 3. Reduce the patient load on Al-Assad hospital and secure advanced treatment

Responsibility: MOH in collaboration with WHO and the SARC.

1. Establish a Type 3 hospital in Deir-ez-Zor to provide follow-up and wound care for patients, if Al Assad hospital faces an overload of patients.
2. Evacuate patients by road or air to Damascus or Aleppo for tertiary care. The journey to Damascus by road takes six hours. Transportation by air is therefore the preferred option.

## 4. Establish standby surgical capacity in Abu Kamal or Hajin

Responsibility: Syrian MOH in collaboration with WHO and other donors.

If and when the Syrian army retakes control of Abu Kamal city:

1. Given that Al Basel national hospital in Abu Kamal has been destroyed, the fastest way to establish damage control surgery capacity would be to set up a field hospital either on the premises of the hospital or in the area. The establishment of a Type 2 facility in Hajin hospital, which is partly functioning, should be considered.
2. Assess private surgical capacities in the city, including in the four private hospitals in Abu Kamal city. Aisha hospital is partly functioning.

## 5. Establish evacuation pathways to Abu Kamal or Hajin

Responsibility: SARC/ICRC and eventually the MOH and WHO.

There have been movements of the Syrian army from the west towards Abu Kamal. If Abu Kamal is taken over by the GoS, evacuation pathways to Abu Kamal or Hajin will need to be established to receive the large numbers of people fleeing to the south-east. (As stated earlier in this report, it is estimated that only 5% of IDPs from Deir-ez-Zor and south of the city will go north.)

1. Secure five ambulances to evacuate patients.
2. Prepare to establish TSPs around the city.
3. Plan an evacuation pathway from Abu Kamal and Hajin to Damascus.

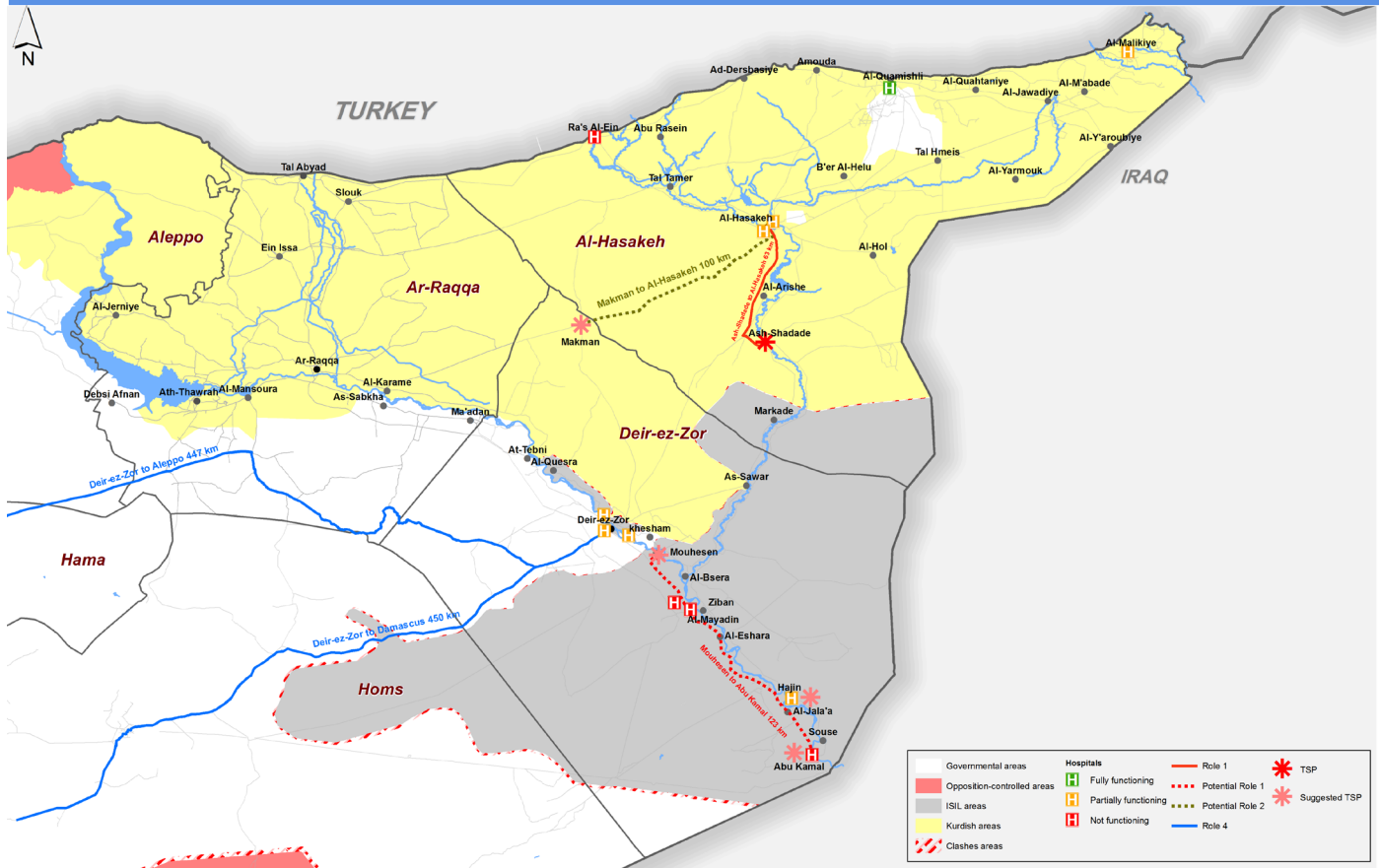
## 6. Identify and organize evacuation pathways for the frontline north of Al Qesra.

Responsibility: Kurdish Red Crescent and cross border partners.

1. Donate two ambulances to supplement the two already stationed in Shedadeh.
2. Explore the possibility of positioning TSPs closer to Makman camp for evacuation to the north.

### Evacuation pathways

Evacuation pathway	Facilities	Managed by	Status	Role category	Distance from Ar-Raqqa centre	Estimated travel time	Patient category
East	TSP around Deir-ez-Zor	SARC/ICRC	Not yet established	1	0 km	10-5 minutes	Red
	Al Assad hospital	Health staff are available in the city; the hospital is run by MOH.	Working	2	2 km	10-5 minutes	Red
North East	TSP Shedadeh	KRC	Working	1	35 km	30 minutes	Yellow
	Hassakeh	Al Hekmah hospital	Working	2	63 km	1 hour	Yellow
	TSP Makman	KRC	To be established	1	50 km	45 minutes	Yellow
	Hassakeh	Al Hekmah hospital	Working	2	100 km	1.7 hour	Red
South East	TSP Mouhesen	SARC/ICRC	To be established	1	5-0 km	5 minutes	Red
	Abu Kamal	Field hospital WHO/ICRC	To be established	2	123 km	2 hours	Red
	TSP north of Abu Kamal	SARC/ICRC	To be established	1	10 km	10 minutes	Red
South East alternative 2	TSPs north and south of Hajin	SARC/ICRC	To be established	1	10 km	10 minutes	Red
	Hajin	Field hospital WHO/ICRC	To be established	2	10 km	10 minutes	Red



## General considerations

The following basic resources are critical for treating trauma patients:

### 1. Electricity:

Power from the general national network is unreliable. Adequate generators and back-up fuel supplies should be secured for all hospitals.

### 2. Oxygen:

To secure adequate oxygen supplies, oxygenators and compressors for filling bottles should be available at all major hospitals.

### 3. Blood:

Hospitals should have blood banks with access to laboratory testing for contagious diseases such as HIV and hepatitis B and C, and procedures for the safe handling of blood. In Syria the Central Blood Bank (CBB) in Damascus – managed by the Ministry of Defence – is responsible for all satellite blood banks in the country. Since the conflict began, the national authorities have reserved 80% of blood supplies for civilian patients in public and private hospitals (the remainder is reserved for the army). The main challenge is the lack of blood test kits due to the embargo.

### 4. Radiology services:

Doctors cannot manage wounded patients without diagnostic imaging. This means that each hospital must have a functioning portable X-ray machine at the very minimum. In Syria, all images are made on film; most hospitals have film processors for automated development, but many of them are no longer in working order. Thus, hospital film processors must be urgently repaired or replaced. Similarly, CT scanners in many hospitals are no longer working and should be repaired or replaced as soon as possible.



## List of equipment

Hospitals need regular, reliable power supplies. In most hospitals, image processing is being performed manually since development processors have broken down. To maintain the speed of patient turnover, this has to be addressed. The need to rebuild and reorganized the damaged hospitals in the region will have to be considered once the situation is better assessed.

### Medical equipment and supplies required for Deir-ez-Zor Governorate

Equipment	Quantity
Basic X-Ray machine	2
Mobile X-Ray machine	2
X-ray film processor	2
Computed radiography X-ray System-CR	1
General purpose ultrasonic scanner for peripheral vascular, abdominal, obstetrics with three probes (linear, convex and transvaginal)	2
Anaesthesia machine	3
Ventilator (adults and children)	4
Ventilator (neonates)	2
Electrosurgical unit -cautery	3
Surgical light with satellite	1
Surgical suction unit	2
General operating table	2
Orthopaedic operating table	1
Nursing instrument table	2
Delivery table	2
Electrical cast cutter	1
Defibrillator with monitor	3
ECG (multi-channel)	3
Physiologic monitor	2
Infant incubator	4
Endoscopic equipment	6
Haemodialysis machine	4
Steam sterilizer - around 170 L	1
Dry sterilizer - around 30L	2
Nebulizer	5
Oxygen cylinder for ambulance	10
Portable oxygen concentrator	10
Generator 600 KVA	1
Generator 150 KVA	1
Generator 250 KVA	1
C-arm X-ray	3
Oxygen generator	1
ICU beds	20
Blood safety kits (HIV, HbsAg, HCV)	20
Surgical kits	20
Trauma kits	20
Lab supplies	

## Overview of Deir-ez-Zor health care system

Table 1: National hospitals in Deir-ez-Zor governorate by district, type, hospital status, accessibility, bed capacity, hospital condition

#	Hospital Name	Governorate	District	Hospital Type	Hospital Status	Access-ible	Actual Served pop	Capacity Beds	Actual Beds	ICU beds	Hospital Condition
1	Children and Obstetrics hospital	Deir-ez-Zor	Deir-ez-Zor	Specialized	Partially Functioning	Hard to access	414	152	25	0	Fully damaged
2	Al-Mayadin National hospital	Deir-ez-Zor	Al-Mayadin	Specialized	Non-functioning	Yes		64			Not damaged
3	Al-Bassel-Abu Kamal hospital	Deir-ez-Zor	Abu Kamal	General	Non-functioning	Yes		120			Fully damaged
4	Al-Furat hospital	Deir-ez-Zor	Deir-ez-Zor	Specialized	Partially Functioning	Hard to access	1033	106	14	8	Fully damaged
5	Modern Medicine hospital	Deir-ez-Zor	Al-Mayadin	General	Non-functioning	Yes		65			Partially damaged
6	Al-Assad hospital	Deir-ez-Zor	Deir-ez-Zor	General	Partially Functioning	Hard to access	1366	300	177	10	Partially damaged
7	Hajin hospital	Deir-ez-Zor	Hajin	General	Partially Functioning	Yes	1800	60	60	10	Not damaged

## Human resources in public hospitals

A total of 331 staff are registered in four national hospitals (81 in Children's and Obstetrics hospital, 55 in Al-Furat hospital, 113 in Al-Assad hospital and 82 in Hajin hospital). None of the hospitals has an emergency physician. A detailed breakdown is provided in Table 2 below.

Table 2: Availability of human resources in public hospitals

	Children and Obstetrics hospital	Al-Furat hospital	Al-Assad hospital	Hajin hospital
Practitioner	2	2	0	1
Specialist - orthopaedic	0	0	0	0
Specialist - general	0	0	1	0
Specialist - neurological	0	0	0	0
Specialist - other	0	0	4	2
Emergency physician	0	0	0	0
Resident doctor	1	1	2	0
Dentist doctor	0	0	0	0
Nurse	22	26	52	38
Midwife	17	1	0	3
Pharmacist	5	0	6	0
Laboratory technician	6	9	2	2
Technician	3	6	15	17
Others	25	10	31	19
<b>Total:</b>	<b>81</b>	<b>55</b>	<b>113</b>	<b>82</b>

## Availability of services in public hospitals

Functioning national hospitals provide a variety of general and specialized clinical services including emergency care, child health and nutrition, communicable and noncommunicable diseases, maternal and newborn care, and mental health services. A detailed breakdown is provided in Table 3 below.

Table 3: Availability of health services in public hospitals

Type of health services	Children and Obstetrics hospital	Al-Furat hospital	Al-Assad hospital	Hajin hospital
Emergency services	No	no	yes	No
Outpatient services	Yes	yes	yes	Yes
Inpatient services	Yes	yes	yes	Yes
Emergency surgery	No	NA	yes	No
Elective surgery	No	NA	yes	No
Laboratory	No	yes	yes	Yes
Blood bank	NA	yes	yes	No
Imaging services	Yes	yes	yes	Yes
ICU	NA	yes	yes	No
Trauma	No	no	yes	No
Burn unit	No	no	yes	No
Evacuation	No	yes	yes	No
Child health	No	NA	no	No
Nutrition	No	no	no	No
Communicable disease	NA	no	yes	No
Maternal and newborn	Yes	no	no	Yes
Abortion	Yes	no	no	No
Diabetes	No	yes	no	Yes
Hypertension	No	yes	no	Yes
Cardiovascular	No	yes	no	No
Kidney	NA	no	yes	Yes
Cancer	No	no	no	No
Rehabilitation service	NA	no	yes	NA
Psychiatric service	No	no	NA	NA

## Availability of essential medical equipment in national hospitals

All four hospitals have only a limited amount of essential medical equipment to support health care services. Most medical equipment in Al-Assad hospital is reserved for the Children's and Obstetrics hospital and Al-Furat hospital (which have relocated to the same building of Al Assad Hospital). A detailed breakdown is provided in Table 4 below.

Table 4: Availability of essential medical equipment in national hospitals

	Children and Obstetrics hospital	Al-Furat hospital	Al-Assad hospital	Hajin hospital
Generator	4	3	3	1
Ambulance	0	0	0	0
Operating table	2	0	6	4
Surgical equipment	2	0	5	3
Anaesthesia	2	0	2	3
Incubator	5	0	0	3
Haemodialysis	0	0	10	1
ECG	0	2	3	3
X-ray	0	0	0	1
Portable X-ray	0	1	1	0
CT	0	1	1	0
MRI	0	0	0	0
Ultrasound	1	1	2	2
Ventilator adult	0	0	4	0

Table 5: Primary health care centres (district, type, accessibility, building condition, status)

#	Governorate	Health Centre Name	District	Health Centre Type	Accessible	Building condition	Health Centre Status
1	Deir-ez-Zor	Al-Husseiniye	Al-Husseiniye	Primary Health Care Centre	Yes	Fully damaged	Non-functioning
2	Deir-ez-Zor	Al-Harmoushiye	Al-Husseiniye	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning
3	Deir-ez-Zor	Shakra	Al-Husseiniye	Primary Health Care Centre	Yes	Partially damaged	Partially Functioning
4	Deir-ez-Zor	Mhemide	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
5	Deir-ez-Zor	Hawayej Bou Mis'a	Al-Husseiniye	Primary Health Care Centre	Yes	Partially damaged	Partially Functioning
6	Deir-ez-Zor	Zgeir Jazire	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning



#	Governorate	Health Centre Name	District	Health Centre Type	Accessible	Building condition	Health Centre Status
7	Deir-ez-Zor	Al-Qesra	Al-Husseiniye	Primary Health Care Centre	Yes	Partially damaged	Partially Functioning
8	Deir-ez-Zor	Al-Queber	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
9	Deir-ez-Zor	Jazret Bou Hmeid	Al-Husseiniye	Primary Health Care Centre	Yes	Partially damaged	Partially Functioning
10	Deir-ez-Zor	Hatle	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
11	Deir-ez-Zor	Mrat	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
12	Deir-ez-Zor	Khesham	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
13	Deir-ez-Zor	Tabiyet Jazire	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
14	Deir-ez-Zor	Jadid Ekedat	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
15	Deir-ez-Zor	As-Sabha	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Non-functioning
16	Deir-ez-Zor	Al-Bsera	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
17	Deir-ez-Zor	Shhel	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
18	Deir-ez-Zor	As-S'awe	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Non-functioning
19	Deir-ez-Zor	Ad-Dahale	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
20	Deir-ez-Zor	Abu Khashab	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Non-functioning
21	Deir-ez-Zor	Jarwan	Al-Husseiniye	Primary Health Care Centre	Yes	Not damaged	Non-functioning
22	Deir-ez-Zor	Ath-Thawra	Deir-ez-Zor	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
23	Deir-ez-Zor	Ad-Dahiye	Deir-ez-Zor	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
24	Deir-ez-Zor	Al-Qusour	Deir-ez-Zor	Primary Health Care Centre	Yes	Partially damaged	Partially Functioning
25	Deir-ez-Zor	khaled Ben Al-Walid	Deir-ez-Zor	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
26	Deir-ez-Zor	Al-Bagliye	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Partially damaged	Non-functioning

#	Governorate	Health Centre Name	District	Health Centre Type	Accessible	Building condition	Health Centre Status
27	Deir-ez-Zor	Ayyash	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Partially damaged	Non-functioning
28	Deir-ez-Zor	At-Tebni	Deir-ez-Zor	Primary Health Care Centre	Yes	Not damaged	Non-functioning
29	Deir-ez-Zor	Ash-Shmetiye	Deir-ez-Zor	Primary Health Care Centre	Yes	Fully damaged	Non-functioning
30	Deir-ez-Zor	Abu Shehri	Deir-ez-Zor	Primary Health Care Centre	Yes	Not damaged	Non-functioning
31	Deir-ez-Zor	Harabesh	Deir-ez-Zor	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
32	Deir-ez-Zor	Aj-Jafra	Deir-ez-Zor	Primary Health Care Centre	Yes	Not damaged	Non-functioning
33	Deir-ez-Zor	Al-Abed	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Not damaged	Non-functioning
34	Deir-ez-Zor	Mouhesen	Deir-ez-Zor	Primary Health Care Centre	Yes	Partially damaged	Non-functioning
35	Deir-ez-Zor	Al-Bouleil	Deir-ez-Zor	Primary Health Care Centre	Yes	Fully damaged	Non-functioning
36	Deir-ez-Zor	At-Toub	Deir-ez-Zor	Primary Health Care Centre	Yes	Not damaged	Non-functioning
37	Deir-ez-Zor	First	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning
38	Deir-ez-Zor	Second	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning
39	Deir-ez-Zor	Third	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning
40	Deir-ez-Zor	Fourth	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning
41	Deir-ez-Zor	Fifth	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning
42	Deir-ez-Zor	Al-Ommal	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning
43	Deir-ez-Zor	Polyclinics	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning
44	Deir-ez-Zor	Anti-Tuberculosis	Deir-ez-Zor	Primary Health Care Centre	Yes	Not damaged	Non-functioning
45	Deir-ez-Zor	Polyclinics Specialist	Deir-ez-Zor	Primary Health Care Centre	No (Other reasons)	Fully damaged	Non-functioning
46	Deir-ez-Zor	Ar-Reshdiye Specialist	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning

#	Governorate	Health Centre Name	District	Health Centre Type	Accessible	Building condition	Health Centre Status
47	Deir-ez-Zor	Kabajeb	Deir-ez-Zor	Primary Health Care Centre	No (Security)	Fully damaged	Non-functioning
48	Deir-ez-Zor	Al-Kharita	Deir-ez-Zor	Primary Health Care Centre	Yes	Partially damaged	Non-functioning
49	Deir-ez-Zor	First Al-Mayadin	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
50	Deir-ez-Zor	Second Al-Mayadin	Al-Mayadin	Primary Health Care Centre	No (Security)	Not damaged	Non-functioning
51	Deir-ez-Zor	bekrus Foquani	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
52	Deir-ez-Zor	bekrus Tahtani	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
53	Deir-ez-Zor	Az-Zibari	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
54	Deir-ez-Zor	S'alo	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
55	Deir-ez-Zor	Eslah S'alo	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Non-functioning
56	Deir-ez-Zor	At-Tiba	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
57	Deir-ez-Zor	Mehkan	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
58	Deir-ez-Zor	Al-Kouriye	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
59	Deir-ez-Zor	Garibe	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Non-functioning
60	Deir-ez-Zor	Al-Eshara	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
61	Deir-ez-Zor	Dablan	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
62	Deir-ez-Zor	Sbekhan	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
63	Deir-ez-Zor	Tishrin	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
64	Deir-ez-Zor	Ad-Dweir	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
65	Deir-ez-Zor	Swedan Jazire	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
66	Deir-ez-Zor	At-Tayyane	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning

#	Governorate	Health Centre Name	District	Health Centre Type	Accessible	Building condition	Health Centre Status
67	Deir-ez-Zor	Ziban	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
68	Deir-ez-Zor	Al-Karame	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
69	Deir-ez-Zor	Al-Jerzi Ash-Sharqi	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
70	Deir-ez-Zor	Abu Hardoub	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
71	Deir-ez-Zor	First Abu Kamal	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Non-functioning
72	Deir-ez-Zor	Hay Al-assad	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
73	Deir-ez-Zor	Ar-Ramadi	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
74	Deir-ez-Zor	Aj-Jala'a	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
75	Deir-ez-Zor	Ash-Sh'afe	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Non-functioning
76	Deir-ez-Zor	Hajin	Hajin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
77	Deir-ez-Zor	Granj	Hajin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
78	Deir-ez-Zor	As-Salhiye	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
79	Deir-ez-Zor	Abu Al-Hassan	Hajin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
80	Deir-ez-Zor	Al-Gabra	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
81	Deir-ez-Zor	Hasrat	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
82	Deir-ez-Zor	As-Syyal	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
83	Deir-ez-Zor	Al-Mattarda	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
84	Deir-ez-Zor	Al-Quit'a	Abu Kamal	Primary Health Care Centre	No (Security)	Not damaged	Non-functioning
85	Deir-ez-Zor	Al-Bwedran	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
86	Deir-ez-Zor	Al-Bahra	Hajin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning

#	Governorate	Health Centre Name	District	Health Centre Type	Accessible	Building condition	Health Centre Status
87	Deir-ez-Zor	Abu Hamam	Hajin	Primary Health Care Centre	No (Security)	No Report	Non-functioning
88	Deir-ez-Zor	Al-Keshkiye	Hajin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
89	Deir-ez-Zor	As-Safafne	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Non-functioning
90	Deir-ez-Zor	As-Sawar	As-Sawar	Primary Health Care Centre	Yes	Partially damaged	Partially Functioning
91	Deir-ez-Zor	Al-Hreijiye	As-Sawar	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
92	Deir-ez-Zor	Al-Hejne	As-Sawar	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
93	Deir-ez-Zor	Al-Hariji	As-Sawar	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
94	Deir-ez-Zor	Rwashed	As-Sawar	Primary Health Care Centre	Yes	Not damaged	Partially Functioning
95	Deir-ez-Zor	Al-Hsein	As-Sawar	Primary Health Care Centre	Yes	Not damaged	Non-functioning
96	Deir-ez-Zor	As-Souse	Abu Kamal	Primary Health Care Centre	No (Security)	Not damaged	Non-functioning
97	Deir-ez-Zor	Al-Mahatta At-Thaniye	Abu Kamal	Primary Health Care Centre	Hard to access (Distance)	Partially damaged	Non-functioning
98	Deir-ez-Zor	An-Neba'e	Hajin	Primary Health Care Centre	No (Security)	No Report	Non-functioning
99	Deir-ez-Zor	Bseitn	As-Sawar	Primary Health Care Centre	Yes	Not damaged	Non-functioning
100	Deir-ez-Zor	Abu Kamal Schistosoma	Abu Kamal	Primary Health Care Centre	Yes	Not damaged	Non-functioning
101	Deir-ez-Zor	Al-Mayadin Schistosoma	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Non-functioning
102	Deir-ez-Zor	Al-Bagouz	Abu Kamal	Primary Health Care Centre	No (Security)	Not damaged	Non-functioning
103	Deir-ez-Zor	Hawayej Al-Mayadin	Al-Mayadin	Primary Health Care Centre	Yes	Not damaged	Partially Functioning



Table 6: Private hospitals in Deir-ez-Zor governorate by district, type, status, accessibility, bed capacity, condition

#	Hospital Name	Province	District	Hospital Type	Hospital Status	Accessible	Estimated actual served pop (during August 2017)	Capacity Beds	Actual Beds	ICU beds	Hospital Condition
1	Pharmex	Deir-ez-Zor	Deir-ez-Zor	Field hospital	Partially Functioning	Yes	350	15	15	0	Partially damaged
2	Aisha	Deir-ez-Zor	Albu Kamal	Private	Partially Functioning	Yes	4500	350	250	12	Partially damaged
3	Al Hana	Deir-ez-Zor	Albu Kamal	Private	Partially Functioning	Yes	1500	No information	No information	No information	Not damaged
4	AlZubair	Deir-ez-Zor	Albu Kamal	Private	Partially Functioning	Yes	800	No information	No information	No information	Not damaged
5	Al Tawfiq	Deir-ez-Zor	Albu Kamal	Private	Partially Functioning	Yes	1300	No information	No information	No information	Not damaged
6	Nuri El Said	Deir-ez-Zor	Al-Mayadin	Private	Partially Functioning	Yes	2200	No information	No information	No information	Partially damaged
7	Al Qahtan	Deir-ez-Zor	Al-Mayadin	Private	Partially Functioning	Yes	1000	No information	No information	No information	Not damaged
10	Al Rahma	Deir-ez-Zor	Al-Mayadin	Private	Partially Functioning	Yes	700	No information	No information	No information	Not damaged
11	AlHammad	Deir-ez-Zor	Al-Mayadin	Private	Partially Functioning	Yes	1100	No information	No information	No information	Not damaged
12	Al Zainab	Deir-ez-Zor	Al-Mayadin	Private	Partially Functioning	Yes	1400	No information	No information	No information	Partially damaged
13	Al Salam	Deir-ez-Zor	Al-Mayadin	Private	Partially Functioning	Yes	900	No information	No information	No information	Not damaged
14	Al Khair	Deir-ez-Zor	Al-Mayadin	Private	Partially Functioning	Yes	650	No information	No information	No information	Not damaged
15	Nabd El Hayat	Deir-ez-Zor	Hajin	Private	Partially Functioning	Yes	1100	No information	No information	No information	Not damaged
16	Sbeikhan	Deir-ez-Zor	Sbeikhan	Private	Partially Functioning	Yes	300	No information	No information	No information	Not damaged
17	Al Kasra	Deir-ez-Zor	Al Kasra	Private	Non-Functioning	NO	-	-	-	-	Fully damaged
18	Al Zayanat	Deir-ez-Zor	Alswr	Private	Partially Functioning	Yes	350	No information	No information	No information	Not damaged