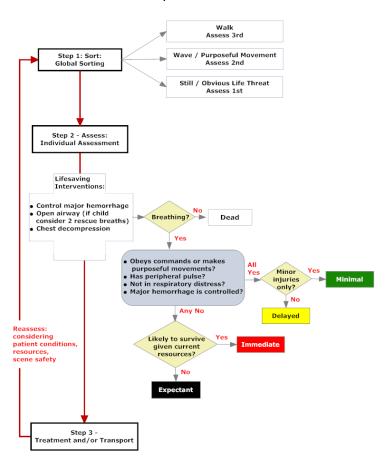
First 5 Minutes!

- Recognize the incident
 - o Notify Providers, Sherry, Security, OC, and Registration
- Prep staff with a quick huddle- overhead all staff to arena and/or send a Secure Chat message
- HUC activate MCI to Operator, SWN, and Trauma Activations
- Develop immediate plan and assign job roles with staff
- Set up- MCI bins, computers, papers, binders, wheelchairs, extra beds, blankets
- Rapid discharge or transfer of patients (Floor staff takes inpatients up)
- Get Extra staff to dept



Charge RN First 5 Minutes Explained!

- Info received regarding possible or confirmed MCI Event
- Charge RN/ED Physician/ED Management/Operations Coordinator to make decision to activate "Emergency Operations Alert".
 - Call to 84444 to activate.
 - Emergency Operations Alert- Phase 1:
 - Notified of a <u>Potential Situation</u> that might require more resources (No SWN)
 - Emergency Operations Alert- Phase 2
 - o <u>Current resources are sufficient</u> to manage the incident or influx of patients (No SWN)
 - o Emergency Operations Alert- Phase 3
 - Additional support and resources are needed- Do a SWN (see below)
- Activate Trauma Red and/or Trauma Yellows as appropriate by calling 84444 and *1 page on call Trauma Surgeon
 - Ask the on call surgeon if they want the whole group paged and send as needed (execute Scenario,
 Trauma Surgeon Paging, next, next, and complete info)
- Have HUC/ETT do SWN for help!- indicate a phone number for staff to call back regarding coming in-use a Zebra phone. (SWN- <u>Execute Scenario, MCI Disaster, Next, Next and complete info</u> "MCI at WMH. Call 262-928-0360 if you are available"). Don't include the Trauma Surgeons in this!!!
- Track staff on form "WMH ED Disaster Call List". (We don't want all staff to just show up- need to space out who is coming when. **DO NOT come before calling in and talking to staff**). This person taking the calls can be <u>ANYONE-</u> clinic Rn, social work, whoever is available. Will have staff from all 3 campuses possibly calling.
 - Charge RN and Management decision of how many staff to come initially. Will depend on event.
 - o Staff not needed initially will be asked to call back in a few hours to check on status
 - o Providers are included in the SWN. They can decide how many are needed to come in
- Assign staff to positions needed Immediately
 - Staff Call back Answerer (see above)
 - MCI Triage RN and MD (if able) (separate from normal ED Triage RN) in Ambo bay
 - Runners
- Get out MCI bins (In EMS Storage Cabinets)
 - MCI Triage Ambo Bay
 - Green
 - Yellow
 - Possible locations to use: COVID waiting room, main waiting room, Cath Lab holding,
 Day Surgery, Outpatient, ED 2
- Other supplies to colored areas
 - Computers (take from Police Room, Fast track rooms)
 - Extra WCs, blankets, O2 bottles

- Call OC to move all admissions and possible admissions to floor with inpatient staff to transport (keep ED beds here)
- Rapid discharge of any ED patients or move to non-critical care rooms/arenas (hallway)
- Move "normal" triage patients to very front waiting room (if using the waiting rooms as triage areas)
- Prep ED rooms with supplies, IV pumps, tubing, Braselow tape
- Call ICU (if needed) to have RN help with patient care- intubations, meds
- Call for more supplies as needed
 - Code Carts
 - Intubation Baskets, Ambu Bags, Ccollars,
 - o Beds, cribs
 - RSI kits
- Registration to T hallway with MCI binders and tags
- Direct ED RNs and ETTs
 - to care for MCI patients
 - o others to care for current ED patients
- Update EM Resource of an event (OC can do this too)
- Talk with PHC Command Center when operational
- Give out sticker nametags to wear on top of gown (ie.- ED RN Michelle)
- Give all staff black permanent markers, put in all rooms
- Security to entrances
- Pharmacy staff to help get meds quickly from Omnicell. Most immediate needed meds will be on override already
- Call to have Anesthesiology (OR and/or OB) come to ED for intubation/line assistance as needed
- Assign MCI patients to appropriate rooms based on need- assigning treatment team also
- If have time before patients start arriving- assign Teams of RNs, ETT, Providers. Get rooms ready to go and send the patients to them
- Expect EMS CREW Response to help with tasks/care When an MCI is activated in the community EMS will be dispatched to the closest ED. This goal is for this to provide the ED with 3-5 EMS partners within 15 minutes of the 911 as a resource to use in the ED. Upon arrival to the ED the crew officer will check in with the ED charge nurse for instructions/tasks.
- Route all MCI patients through the EMS Bay for Triage

EMS CREW RESPONSE - OFFICER

Job Role: Offers direct line of communication with the charge nurse. Oversees and directs EMS staff. Rounds and monitors areas the EMS crew has been assigned to; communicating status of decompensating patients to the charge nurse.

Immediate Tasks:

- Receive immediate directions from the charge nurse.
- Assist in setting up preplanned green/yellow patient care areas with signage.
- Handing out job sheets.
- Communicate to EMS providers there locations and job role.
- Provide first aid and render medical services as needed.
- Provide life saving intervention.
- Provide bleeding control.
- Obtaining vital signs and documenting on patients paper chart/folder.

Secondary tasks:

- Transporting patients
- Assisting with basic splinting
- Rounding on ER patients once yellow and green triage areas are closed.
- Assisting ER staff with various tasks.

Once hospital resources/staff arrive, EMS CREW can be redeployed back to the community if needed – discussion with CREW officer and charge nurse.

Job Role: Offers assistance in an MCI event. Receives direct orders from EMS officer and/or charge nurse. Designated to SALT Triage, green or yellow triage area. Assists with patient movement and transport as needed.

Immediate tasks:

- Receive immediate directions from the EMS officer.
- Assist with crowd control/patient direction outside ED/Ambo Bay with Security
- Assist in setting up preplanned green/yellow patient care areas with signage.
- Communicate to EMS officer if patient decompensating.
- Provide first aid and render medical services as needed up to EMS skill level.
- Provide life saving intervention.
- Provide bleeding control.
- Obtaining vital signs and documenting on patients paper chart/folder.
- SALT triage (paired with ED RN/MD) and re-triaging patients.
- Ensuring everyone has a SALT ribbon and then SALT wrist band.

Secondary tasks:

- Transporting patients
- Assisting with basic splinting
- Rounding on ER patients once yellow and green triage areas are closed.
- Assisting ER staff with various tasks.
- Restocking MCI supplies that are being used.
- Assisting registration with tasks.

(EMS Coordinator/ED Manager/ED staff)

- Obtain radio from EMS office or ED Charge RN desk
- Contact WCC (262-446-5070) to request an MCI radio Frequency if not done already
- Contact on scene Incident Command regarding number of possible patients and triage colors
- Take report on incoming patients and communicate with ED Charge RN and ED MCI Triage Staff
- When MCI scene reports that all patients are transferred to area hospitals, communicate this to ED staff and PHC Incident Command
- If needing to send patients to higher level of care, coordinate resources with WCC for necessary crews.
- Track sending of patients on "Mass Casualty EMS Tracking Form"

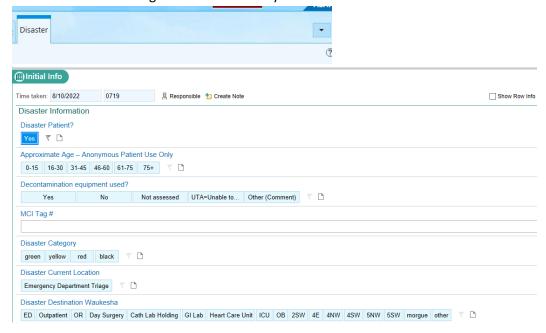
- Call 84444 as directed by Charge RN to activate Traumas and *1 page Trauma Surgeon if needed
- SWN out for ED staff and Providers with specific message and phone number to call back per ED Charge. SWN-<u>Execute Scenario, MCI Disaster, Next, Next and complete info</u> "MCI at WMH. Call 262-928-0360 if you are available").
- SWN for Trauma Surgeons as directed (execute Scenario, Trauma Surgeon Paging, next, next, and complete info)
- Continue with all normal HUC duties
- Track MCI patients on "Mass Casualty Patient Tracking Form" as much as possible
- Page necessary providers
- Contact outside facilities to arrange transfers as needed
- Copy charts and obtain Rad discs

ED RNs

Assigned per Charge RN

- Caring for current ED patients
- Caring for MCI patients
- Working in Triage color areas
- "Normal Triage RN" is still needed (make sure non MCI patients are dealt with in normal fashion)
- Assist in preparing rooms
- Provide all necessary care to MCI patients, ensuring MCI tag is present (place if not already), correct color, and that color and number are entered in EPIC
- Weigh all patients. If a ped, write the actual weight on the special wristband
- Update Charge RN with any changes in condition, possible increased needs
- Ensure patient to Radiology as necessary
- Ensure that testing is ordered in EPIC
- Use CPPS as necessary
- Accompany patients to Radiology as needed
- Attempt to identify Doe patients and note any special characteristics
- Assist in contacting parents/consent if needed
- Label belongings with patients (can be done by ANYONE)
- Complete charting in EPIC (can use paper for quick notes but then need to put in EPIC only using paper if EPIC is down)
 - o Under the disaster tab necessary limited information (some may be completed by registration)
 - Medications, trauma charting, vitals, etc

Click on Arrow on far right and select "Rarely Used" and "Disaster"



ED Providers

- Assign to team with RNs if possible
- Quick Disposition of current ED patients as able

- Assume care for incoming MCI patients
- Perform ATLS assessment and necessary interventions
- Assist with triaging of patients in specific color areas, verifying correct triage tags
- Place orders in EPIC. If EPIC downtime, the write on paper charts and order sheets. Can have a "scribe" entering for you
- Consult specialties and outside facilities as necessary
- If staffing allows
 - One Provider to each Triage Color Area in waiting room as necessary (Yellow & Green)
 - One Provider to Radiology/CT
 - o One Provider to MCI Triage
 - o Other Providers to Arena to take primary care of patients
 - Other providers to care for current ED patients
- Arrange for discharge, admission, or transfer

Runners

ED Front Entrance Runner (can be done by any staff) 1-2 (should be stationed along with Law Enforcement or Security)

- Stationed at front Triage Doors
- Direct all MCI patients to enter via the Ambo bay for triage
- If possible, provide all Non-patients (family) with visitor stickers
- Direct non- MCI patients to Triage Desk
- DO NOT turn away any patients

ED MCI Triage Runner/ETT 1-2

- Assist with distribution of MCI bins and preparation of rooms
- Assist with triaging of patients in the EMS bay and transporting patients to the appropriate color areas or rooms.
- Stopping with patients in the T hallway to obtain binders and MCI band

Registration Runner (can be any staff)

- At T hallway with registration, going back and forth to grab or deliver name bands from printer
- Registration or ED staff will verify correct info before placing band on
- Help hand out binders with patients

- Assemble needed equipment to the EMS bay Triage area (MCI Bin, computer, PPE)
- Rapid Assignment and assignment of color tags as patients arrive (ribbons from fanny packs)
- Perform any immediate lifesaving interventions
- Measure kids with Broselow tape
 - o Apply wristbands with estimated color sticker on it (actual weight to be added later)

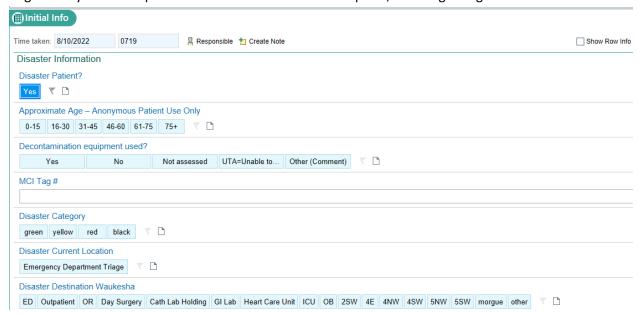
ED MCI ETTs

- Assist with bedside patient care as assigned
- Runners for supplies
- Transportation of patients
- Assist RN as requested

ED Registration

- Stationed at T intersection (2 if able) and ED Triage (1 staff as normal)
- Register patients upon arrival, under the "Disaster" option

Register any unknown patient as a "Doe" and in disaster option, select age range



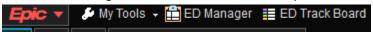
- Provide ID band
- Enter MCI "Disaster Category" into EPIC based on the colored ribbon on patient
- If patient has a MCI band on from EMS, enter color and MCI Tag # in EPIC
- Send binder with patient to next area
- After initial treatment provided, work with families, patients, staff to verify, and complete registration information
- If/when have more staff, can start full registering patients in the Green and Yellow areas

- Change context to see ED board (see below)
- Assist as runners between areas
- Assist with care of other patients- give meds, take vitals, etc
- Start care for any admissions
- Assist with transportation of patients to CT, etc.
- ICU RNs to assist with procedures and medications
- If peds patients without parents, need a staff member to remain with young children in rooms (under 8 for sure to have someone with them)

EPIC button to "Change Context" and select appropriate location



Click on ED Manager and then able to see all the patients in the ED

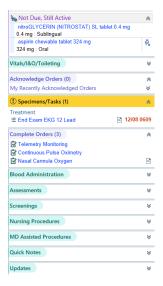


After selecting a specific patient- either use tabs to document, see meds, orders like you normally would OR

Select "ED Narrator". This is where we do most of our work from!



On the Left side, there are many options of things to document, can see what meds are ordered, and acknowledge orders



- Will need to call Labor pool for assistance but many will probably just show up in the ED
- Assuming care for any pending admits
- Assist with placing of necessary orders in EPIC for MCI patients (if able to float from rooms or with providers to enter orders, follow them). Use a WOW-
- Assist with providing care to patients as needed

- Stationed at both entrances to EMS Bay
- Stationed at front ED Entrance (all other entrances closed)
- Admit staff members with badges present
- Admit patients and families as appropriate
- Ensure safety to all staff
- NOT to turn away any non MCI walk in patients

MCI info for Registration

Patients will be triaged in the EMS bay and be triaged to a MCI color and have a ribbon of this color placed on their wrist.

Patients will be brought to the hallway where Registration will register them, Doe registration if needed, ID band on/verified. Folder/binder and stickers sent with patient.

Some patients might arrive with bands from EMS. MCI triage will ensure that the triage color is correct.

• IF the patient reaches you with the band on from EMS, please enter the number & color into EPIC.

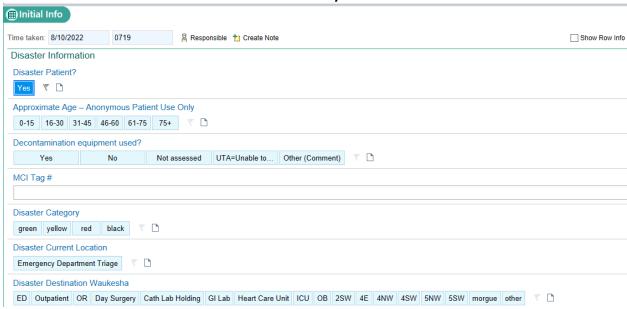
Example of MCI Band- not all EMS uses the same type



Below info for each location is very similar except for the location of Registration and binders vs folder

ED Registration-WMH

- Stationed at T intersection (2 if able) and ED Triage (1 staff as normal)
- Register patients upon arrival, under the "Disaster" option
- Register any unknown patient as a "Doe" and in disaster option, select age range



- Provide ID band, stickers into Binder
- Enter MCI "Disaster Category" into EPIC based on the colored ribbon on patient
- If patient has a MCI band on from EMS, enter color and MCI Tag # in EPIC
- Send binder with patient to next area
- After initial treatment provided, work with families, patients, staff to verify, and complete registration information
- If/when have more staff, can start full registering patients in the Green and Yellow areas