

	TITLE: EMERGENCY RESPONSE PROTOCOL	REV NO. 0	GRH TC- 21/2010
	PATIENT CARE AND TREATMENT PROTOCOLS	DATE: 01.07.2010	
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## GUIDELINES FOR EMERGENCY RESPONSE PROTOCOL ARE AS FOLLOWS

In case of mass casualty/accident and emergency the following steps are to be followed to streamline the resources of the hospital

1. Alerting process and personnel notification
2. Initial response
3. Transportation of patients
4. Reception of patients
5. Security
6. Media relations
7. Family information centre
8. Stress management unit
9. Termination
10. Evaluation
11. Outline of individual responsibilities
12. Standard Operative Procedures

### Alerting process and personnel notification (1/3)

The hospital reception/staff is alerted about an incident that has occurred in the island/nearby island.

The details that one must obtain if possible are

Sl. No.	Detail	Reason
1	Name of the caller	For purposes of identification
2	Telephone number of the caller	To contact him/her in case his/phone is out of credit/ to get more details after he initial call/ to make an expert talk to him/her
3	Exact location of the incident	To ascertain the mode of transportation that is required
4	If the caller is also injured	So that the team can rush to the area/mobilize other resources
5	How many people involved in the accident	So that the hospital can alert the departments about the logistical requirement
6	Is there transportation available from the site of accident to the hospital	In case injured patients are arriving by their own transportation e.g. from their island by speed boat; so that ambulance has to receive the injured at the ferry
7	Is there a fire hazard/fire burning near the accident site	So that the team approaching would do so with caution/fire brigade can be alerted simultaneously
8	Is there a hazard of electric shock?	The team must go in with insulated boots and use wooden sticks to move the victims
9	Tell the caller to be calm and give him an estimated time of arrival	This is done to allay anxiety and reassure the caller/victims that help is on the way.

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### Alerting process and personnel notification (2/3)

Color code is used to classify the injured

Sl. No.	Code	Injury
1	Black	Dead
2	Green	Minor injuries - Abrasions, lacerations
3	Yellow	Non-life threatening major injuries- Fractures, Deep lacerations, minor burns
4	Red	Life threatening injuries- Open Chest injury, Head injury, Polytrauma

Reception/PRO will inform the following

- Ambulance Drivers
- Manager
- Medical Officer In-Charge
- Nursing In- charge
- Paramedical staff (Laboratory/X-ray)
- Police Department
- Fire brigade (if there is a fire hazard)
- Store in-charge
- Security in-charge

### Alerting process and personnel notification (3/3)

- Respective in-charges will inform their team members to reach the hospital as soon as possible/give them a time frame (if patient is coming by sea)
- Paramedical staff come on the scene immediately/based on the time frame.
- Manager informs relevant authorities (atoll office/island chiefs/MNDF/Police)
- Store in charge ensures that store is ready for all consumables that are needed
- Security in charge alerts the security for crowd control.
- Blood donors are called only for code yellow or code red.

### Initial response

Team that is mobilized to the accident area/ferry is as follows

Sl. No	Code	Team	Paraphernalia
1	Black	Ambulance driver, Nurse	Stretcher
2	Green	Ambulance driver. Nurses	Stretcher, Oxygen cylinder, Emergency kit
3	Yellow	Ambulance driver, 2 Nurses 1 medical Officer	Stretcher, Oxygen cylinder, Emergency kit
4	Red	Ambulance driver, 2 Nurses 1 Medical Officer, 1 Surgeon	Stretcher, Oxygen cylinder Emergency kit

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At the accident area, each victim undergoes a primary assessment (as per poly trauma protocol) and the team in the hospital is informed regarding

- a) Number of victims
- b) Nature of injuries
- c) If blood would be needed
- d) Fire/electric shock/explosion hazard
- e) Need for more ambulances at the site

### **Transportation of patients**

Patients are transported from the site of accident to GRH maintaining ABC. (as per poly trauma protocol)

### **Reception of Patients/Security**

Patients are received and a FIFO policy is used to see that all patients are attended to using appropriate protocols (dressing, burns, Polytrauma)

A triage is done to see that the treatment is done as per Code Red>>Code Yellow>>Code Green>>Code Black

Security ascertains crowd control and ward safety in case of vandalism/miscreants

### **Media relations**

Manager, MOIC, NS, PRO have a meeting and then the Manager releases a report to the media. No one else other than the manager is permitted to speak to the media.

### **Family information centre/Stress management unit**

A desk will be set up for the following purposes

- a) Identification of patients
- b) Informing the condition of the patients to their relatives
- c) Coordinating transport and logistic if the need arises.
- d) Stress management of the patient party

### **Termination**

The exercise will terminate when all the patients have received primary care and all the paper work has been done.

### **Evaluation**

Post-event evaluation will be done to ensure that all steps went as per the protocols and scope for improvement will be always given a priority.

### **Outline of individual responsibilities/SOP**

As per the protocols, command structure of a given patient as per Polytrauma protocol.

Injuries to be treated as per individual protocols.