Conference Learnings

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Responding to Mass Casualty Events

- **Triage**
  - Delay treatment of all but the sickest patients until the incident is defined
  - Over triage leads to resource consumption

- **Communication**
  - With people on the scene
  - Between EMS responders and hospitals
  - What will you do if cell phone services are inoperable?
Responding to Mass Casualty Events

- **Patient identification and tracking**
  - How will we identify victims?
  - How will we locate victims being treated at other hospitals?
  - How will responding hospitals address HIPPA issues?
  - How can we assist family members trying to locate victims being treated at other area medical centers?

- **Family assistance and outreach**
  - Establish a family waiting area away from the media
  - Assist family members in locating victims that may have been taken to other area medical centers
  - Anticipate the need for food and lodging, especially for family members that may come from out of the area

- **Media management**
  - Have a staging area for the media that is away from patient care areas and separate from the family waiting area.
  - Establish a media parking area that does not impede staff and visitor parking.
  - Establish a protocol for regular media updates
Learning to Consider for LVHN

- **Plan Ahead**
  - Develop a plan for managing mass casualty events
  - Appoint crisis managers to address key areas
    - Communication
    - Triage
    - Patient identification and tracking
    - Family Assistance and outreach
    - Media management
Learning to Consider for LVHN

- **Staff Training**
  - Assure that the staff you will depend on in an emergency have been well trained and know your crisis management plan

- **Practice, Practice, Practice!**
  - Have regular practice drills
  - Identify potential problem areas
  - Revise your plan as necessary
Group Discussion

* What would LVHN do in the event of a mass casualty incident?

* What system would we use to accurately triage patients?

* How would we conserve resources and avoid OVERTRIAGE?

* How would we communicate with other local hospitals who were also receiving victims?

* How would we address HIPPA issues?

* How would we address the needs of family members?

* How would we manage the media response?