



Emergency Medical Services System Response

Emergency Department Response

Surgical Department Response

Intensive Care Unit Response

Radiology Response

Blood Bank Response

Hospitalist Response

Administration Response

Drugs and Pharmaceutical Supplies

Nursing Care

■ **Managing Surge Needs for Injuries: Nursing Care**

PURPOSE

To accommodate the additional nursing resources required in a community following a terrorist bomb explosion and to treat 300 injured patients for up to 72 hours.

BACKGROUND

The Madrid, Spain, terrorist bombings were used as a model to help develop solutions for managing rapid surge problems during a mass casualty event.

On March 11, 2004, 10 explosions occurred almost simultaneously on commuter trains in Madrid, killing 177 people instantly and injuring more than 2,000. On that day, 966 patients were taken to 15 public community hospitals. More than 270 patients arrived at the closest facility between 8:00 a.m. and 10:30 a.m.

Federal resources should not be expected to arrive sooner than 72 hours from the time of the explosion. Resources can be delayed by the time taken to deploy them and by emergency personnel responding to multiple communities.

GOAL

Mobilize the appropriate number of facilities and beds, nursing staff, and resources required to treat 300 injured patients for up to 72 hours.

REQUIRED RESOURCES

Staff: A disaster plan should be devised, and staff should be trained and drilled to ensure that appropriate nursing staff levels will be available during an event. The plan should include a call-back schedule (ensuring that staff with appropriate experience in emergency medicine, surgery, and intensive care are available) and a mechanism for notifying staff and activating the plan, credentialing volunteers, and ensuring the safety and welfare of staff responding.

- ▶ ***This document is a resource guide. Local needs, preferences, and capabilities of the affected communities may vary.***

ASSUMPTIONS

- ◆ Nursing personnel are essential to ensure an effective response to a bombing, including patient care, patient tracking and information management, and logistical support.
- ◆ Most nurses are not familiar with treating the injuries resulting from bomb blasts.
- ◆ Nurses will be expected to take care of patient populations, including pediatric patients, whom they are not familiar with treating.
- ◆ Nursing staff will be familiar with the hospital disaster plan, their individual roles and responsibilities, and the roles and responsibilities of all essential departments.

ACTION STEPS

1. Develop a plan for rapid expansion of nursing staff.
2. Have protocols in place for tiered staffing.
3. Implement just-in-time nursing training materials about bomb blast injuries.
4. Implement just-in-time training materials about pediatric trauma and bombing injuries.
5. Develop mechanisms for rapid deployment of nurses with pediatrics expertise.
6. Train nurses to accommodate and treat a rapid influx of patients.



7. Implement rapid patient discharge for patients who can go home or be quickly transferred to long-term care.

8. Maintain notification list of staff. Every department should have a current list that identifies staff by their proximity to the hospital.

9. Maintain a centralized database with staff competency skills, such as Advanced Cardiac Life Support® (ACLS), Trauma Nurse Core Course (TNCC), Emergency Nurse Pediatric Course (ENPC), and Pediatric Advanced Life Support (PALS). Identify who is competent to care for critically ill patients.

10. Consider utilizing a rapid response team model to access additional nursing support.

EVALUATION

- ◆ Hospitals/health systems should plan and execute a drill with emergency medical services (EMS) at least once a year. The drill should include objectives to accommodate 300 patients with beds, staffing, and resources.
- ◆ Critique the completed drill, write a summary report, and share findings with participants. Hospital administrators should incorporate findings of the summary report in disaster plan revisions. Any deficiencies should be tested in subsequent drills.
- ◆ Planning and conducting a drill will require considerable financial commitment. Exercises must be done in conjunction with state or county/city emergency management agency staff having the resources to conduct drills.

For more information, visit <http://emergency.cdc.gov/masscasualties>.