



DMAT: RHODE ISLAND ONE

Response to a pediatric multiple casualty drill

The traditional role of Disaster Medical Assistance Teams (DMATs) during mass casualty incidents (MCIs) has been that of post-incident support. This can encompass varied responsibilities.

Recent examples include:

- Providing medical care to recovery workers and assisting Disaster Mortuary Operations Response Teams during the Egypt Air Flight 990 recovery operations;
- Delivering medical services to rescuers and recovery personnel at the World Trade Center disaster;
- Distributing antibiotics to postal workers after the anthrax attacks in New York City in the fall of 2001; and
- Filling non-medical ICS/EOC positions and setting up medical aid at the family assistance center after the Station Night Club Fire in West Warwick, R.I., in February 2003.

Although DMATs weren't originally intended to serve as first responders, recent events dictate their responsibilities continue to broaden. Many DMATs provide medical cover and support at mass-gathering events, such as air shows, festivals, political events and sporting venues, where there is potential for an MCI. During some deployments, such as at the World Trade Center, there is a real possibility of a secondary event leading to an MCI. Some entities even plan on using DMAT personnel and resources as first responders in the event of an MCI in their jurisdictions or facilities.

The increased responsibilities often put Rhode Island 1 (RI-1) DMAT in a position to respond first to an MCI. With this in mind, the team developed a plan to assist in this role and tested it at a Boy Scout Camporee at the Washington County

Fairgrounds May 2-4, 2003. RI-1 DMAT had committed to provide medical services to the Camporee, with an expected attendance of 2,000-3,000 Boy Scouts. The leadership agreed to allow 200-300 Scouts to volunteer as simulators for a full-scale exercise.

The purpose of the exercise was to test the MCI plan. The following procedures were assessed: field triage; accountability/tracking; treatment; transport; responder health and safety during MCI; security; managing media and VIPs; logistical capabilities; internal and external communications; and command, planning and liaison functions.



PHOTOS COLIN SMART

The Smart Triage transportation tag tracking system uses a specially designed multi-sleeve organizer to keep stubs organized and secure.

Exercise play began at 1405 HRS with a simulated radio call that a severe wind event had impacted a densely populated area of the Camporee. Approximately 270 Boy Scouts with simulated injuries were prepared for the event. Another 70 simulators

played such roles as unsolicited volunteers, media, trapped and contaminated victims, parents and first responders.

On activation, members of the RI-1 DMAT responded and implemented their major incident plan. The basic structure of the plan was implemented with field triage teams deployed, a casualty clearing point established, and a command post and evacuation center established.

Two of the major objectives to be assessed were field triage and patient accountability. To assist in the objectives, the Smart Incident Command System was used. This new-to-the-United-States scene management and triage system has been used in the UK for the past five years. One concept of this system is simplicity. Anyone who has ever been through the chaos of an MCI, with or without pediatrics, recognizes that even the most simple task can prove complex. The system held up well under high stress.

Field triage teams were deployed in pairs as opposed to the tradition of one person initiating triage. For primary triage to be effective and remain fluid, the triage officer has several tasks to undertake: assess each patient; apply a triage tag; record numbers and severity of injured people; provide rapid lifesaving treatment; and cope with concerned, uninjured survivors.

Trying to do each of these tasks in the highly charged atmosphere of an MCI is one of the most difficult roles in prehospital care. Using the concept of triage in pairs allows the first person in the team to make an assessment and apply rapid treatment. As this happens, the second person is preparing a Smart Tag, recording numbers and severity and managing the concerned bystanders. The end result allows triage to remain fluid, lowers the stress of



Triage personnel use a Smart pediatric assessment tape to assist in appropriate triage of a pediatric patient.



A triage team assesses a pediatric patient. Note the special, foldout SMART triage bag on the rescuer's hip.

the triage team and enhances communication of patient numbers and severity at an early point, which allows for appropriate resources to be deployed to the scene.

Throughout the exercise, staff members faced problems not encountered in daily EMS/hospital activities: intrusive media; security issues; complex communication channels; and resource deficiency.

Overall, organizers believe the drill was a success for two reasons: 1) The management structure deployed was simple and had been tried and tested at various levels, and 2) team personnel and all support staff took a professional approach throughout the drill.

Many lessons were learned, but if there is a piece of advice that can be imparted to anyone planning a large-scale MCI exercise or designing a response plan for the man-

agement of MCIs, it is, "Keep it simple."

We can do this only when we provide a management structure that is simple and rugged for our staff to work within. When we achieve this, the outcome is the production of the maximum numbers of survivors from the scene. Not a bad aim to work toward.

—Colin Smart

AROUND THE INDUSTRY

American LaFrance Restructures Its Business

Lots of changes have been taking place at American LaFrance Corp. over the past few months. First, the company sold its MedicMaster emergency medical supplies business to Bound Tree Medical LLC. "The sale of the MedicMaster medical supplies business reflects American LaFrance's desire to concentrate on our core fire and emergency apparatus business," says Marc Gustafson, American LaFrance president.

That's just part of the total restructuring American LaFrance has undertaken. "We're getting back to the fundamentals," says Gustafson. "And to be quite frank, we've only just begun. We've completely revamped our business model to align manufacturing efforts of each plant to specialize in a particular product offering or technology." The consolidation has increased line capacity by more than 20% and reduced order turnaround time.

American LaFrance also announced three product enhancements to its fire apparatus, pumper and aerial lines.

Finally, **Michael M. Popovich** has been named the new vice president of marketing and strategy. Popovich has 23 years' experience in the commercial vehicle business. Most recently, he was vice president of sales and marketing at Autocar Truck. Popovich now has responsibility for all aspects of marketing, including product, promotion and strategy.

—AML

NAMES IN THE NEWS

Minn. Volunteers Honored for Length of Service

Five EMTs in Warroad, Minn., got a surprise when they showed up for dinner at a local restaurant during EMS Week. To get them there, their spouses had come up with reasons as varied as, "You didn't

take me out on Mother's Day" to "We're going to a birthday party." In reality, they were the guests of honor at a recognition dinner. The five of them have been on call for Warroad Rescue Unit (WRU) for a total of more than 139,000 hours.

Wayne Mitterling and **Donnie Cole** have both served 25 years and are state examiners for testing first responder and EMT-B practical stations. **JoAnne Heppner** has been with the squad for 24 years; she is a former CPR and basic first aid instructor. **Clyde Friesner** joined the squad 22 years ago; he is currently a CPR



PHOTO COURTESY WARROAD RESCUE UNIT

Warroad Rescue Squad EMTs combined have more than 116 years of service. Back row: JoAnne Heppner, Donnie Cole, Bruce Beisel. Front row: Wayne Mitterling, Clyde Friesner.

and basic first aid instructor. **Bruce Beisel** is the youngster of this select group with *only* 20 years of service in the squad.

All of them have taken their turns as squad officers and spent at least 100 hours on call during each month they've been with WRU. In addition, there were all the hours "attending meetings and training sessions, covering special events and working ambulance fund-raisers," says Joy Bukowiec, EMS manager at WRU.

WRU is a small, but dedicated, squad, with 17 volunteer EMTs, four paid paramedics and two ambulances. Based in Warroad—population about 1,700—the squad covers an area of 692 square miles. Bukowiec says they average about 400 calls a year. The average tenure for all volunteers is between seven and 19 years.

Bukowiec attributes WRU's high retention rate to a local employer, in addition to the personal commitment of the volunteers. Almost half of the squad work for Marvin Windows and Doors—the third largest wood window manufacturer in the country. Marvin Windows allows on-call