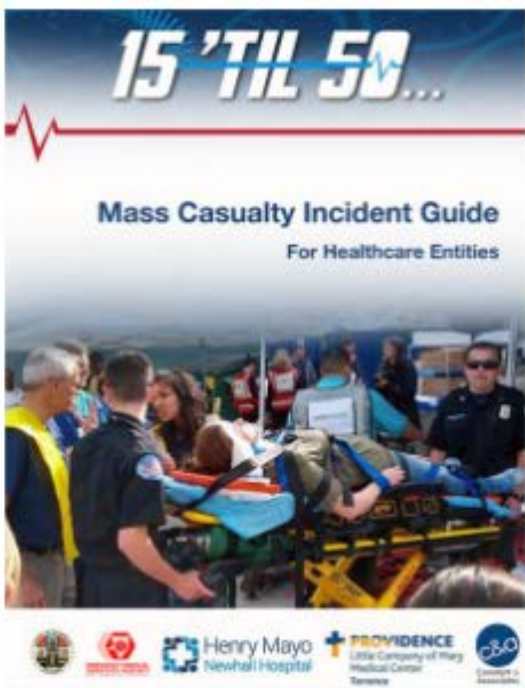




MCI Plan

Tayfun Ozturk, Steven Van Den Broucke
Mattia Kolletzek, Michael Augello



MCI Guide

The Guide provides a comprehensive explanation of the 15 'til 50 model. It offers a step-by-step walkthrough for developing a 15 'til 50 Program.

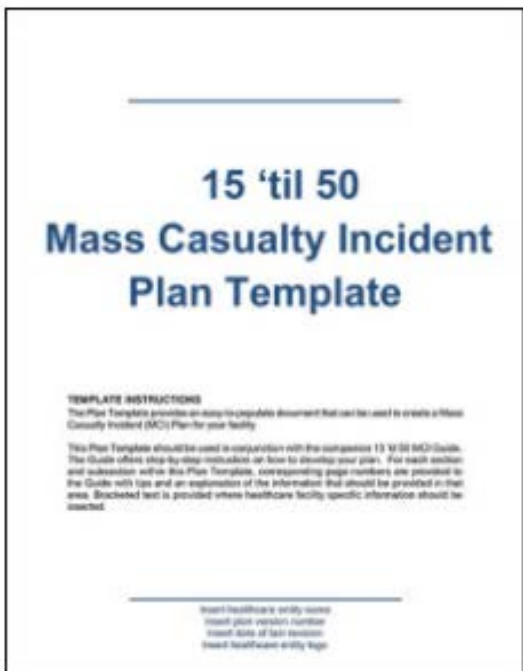
[Download the Guide](#)



MASS CASUALTY INCIDENT RESPONSE PLAN RICELAND SIMULATION EXERCISE

MCI Plan

Mick Molloy Dip ROM MSc MCH FRCEM FFSEM
Research Director Disaster Medicine
BIDMC/HHI Disaster Medicine Fellowship Boston



MCI Plan Template

The Plan Template provides an easy-to-populate document that can be used to create a MCI Plan for your facility.

[Download the Plan Template](#)



Critical elements of plan

- ~~Foreword~~
- Introduction
- Pre incident - Current Capabilities
- Activation
- Operations
- Transition
- Appendices

15 'til 50 **Mass Casualty Incident** **Plan Template**

Plan – Introduction Section

- Overview : **MCI Plan for Riceland**
- Purpose: **Mitigate impact of a MC Event; rapidly deploy staff, supplies, and equipment** “Dual Wave Phenomenon”
- Scope: **Country plan, + generic plan for each hospital: adapt to local context**
 - **Emergency Operations Plans (EOP) --- > “All-Hazards”**
- Assumptions



Assumptions

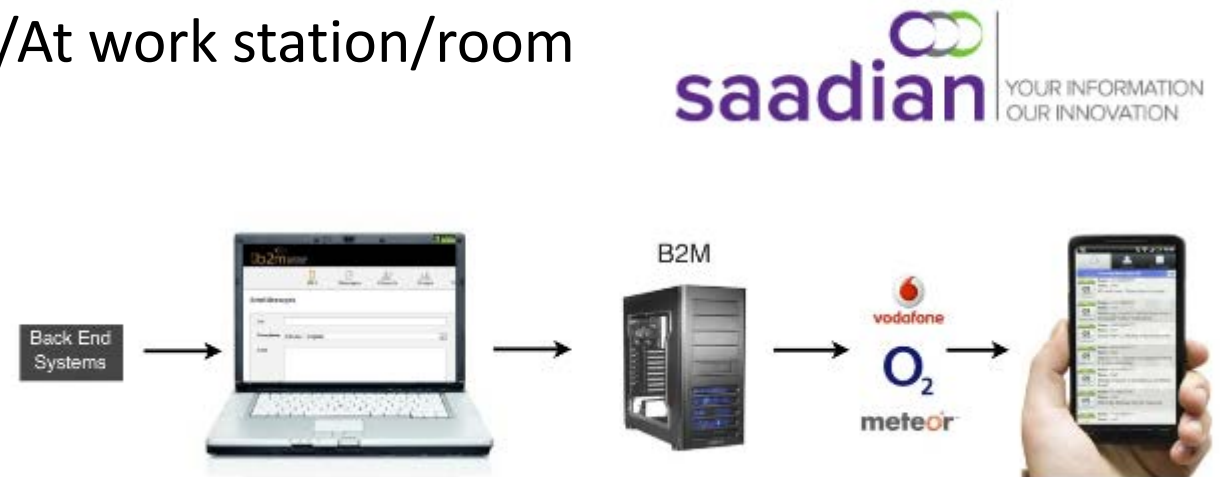
- Hospitals/industrial-nuclear plants already have emergency plan;
- 118 already in place
--- > SUPPLEMENT
- Initial 15': staff on duty
- Aid from abroad: neighboring district, country; MIN 24h!

- Surge Capacity???
- Buddy Aid: **Transport (see below)**; ambulance, private, public (buses, taxi), train, helicopter

Plan – Pre-Incident Section



- Identify decontamination area: **each hospital + at scene: fire-brigade, to remove clothes, PPE's with clothes individually adapted**
- Identify roles and alternates in advance
 - **ICS/HICS, back-ups! (cfr. at night), list available with 'on call' persons, electronic: e.g. SAADIAN, satellite back-up**
 - Action cards (on back of id badges)/At work station/room



PPE

11

FR Rainwear



FR RAINWEAR

DESCRIPTION **SKU** **PRICE**



FR RAINWEAR JACKET MIDWEIGHT, ORANGE FR-118, FR-119, FR-120, FR-121, FR-122	FR-118	
SIZE: SMALL	FR-123	850018
SIZE: MEDIUM	FR-124	850019
SIZE: LARGE	FR-125	850020
SIZE: XL	FR-126	850021
SIZE: XXL	FR-127	850022



FR RAINWEAR TROUSERS MIDWEIGHT, ORANGE FR-118, FR-119, FR-120, FR-121, FR-122	FR-119	
SIZE: SMALL	FR-128	850023
SIZE: MEDIUM	FR-129	850024
SIZE: LARGE	FR-130	850025
SIZE: XL	FR-131	850026
SIZE: XXL	FR-132	850027



FR RAINWEAR BIB MIDWEIGHT, ORANGE FR-118, FR-119, FR-120, FR-121, FR-122	FR-120	
SIZE: SMALL	FR-133	100628
SIZE: MEDIUM	FR-134	100629
SIZE: LARGE	FR-135	100630
SIZE: XL	FR-136	100631
SIZE: XXL	FR-137	100632

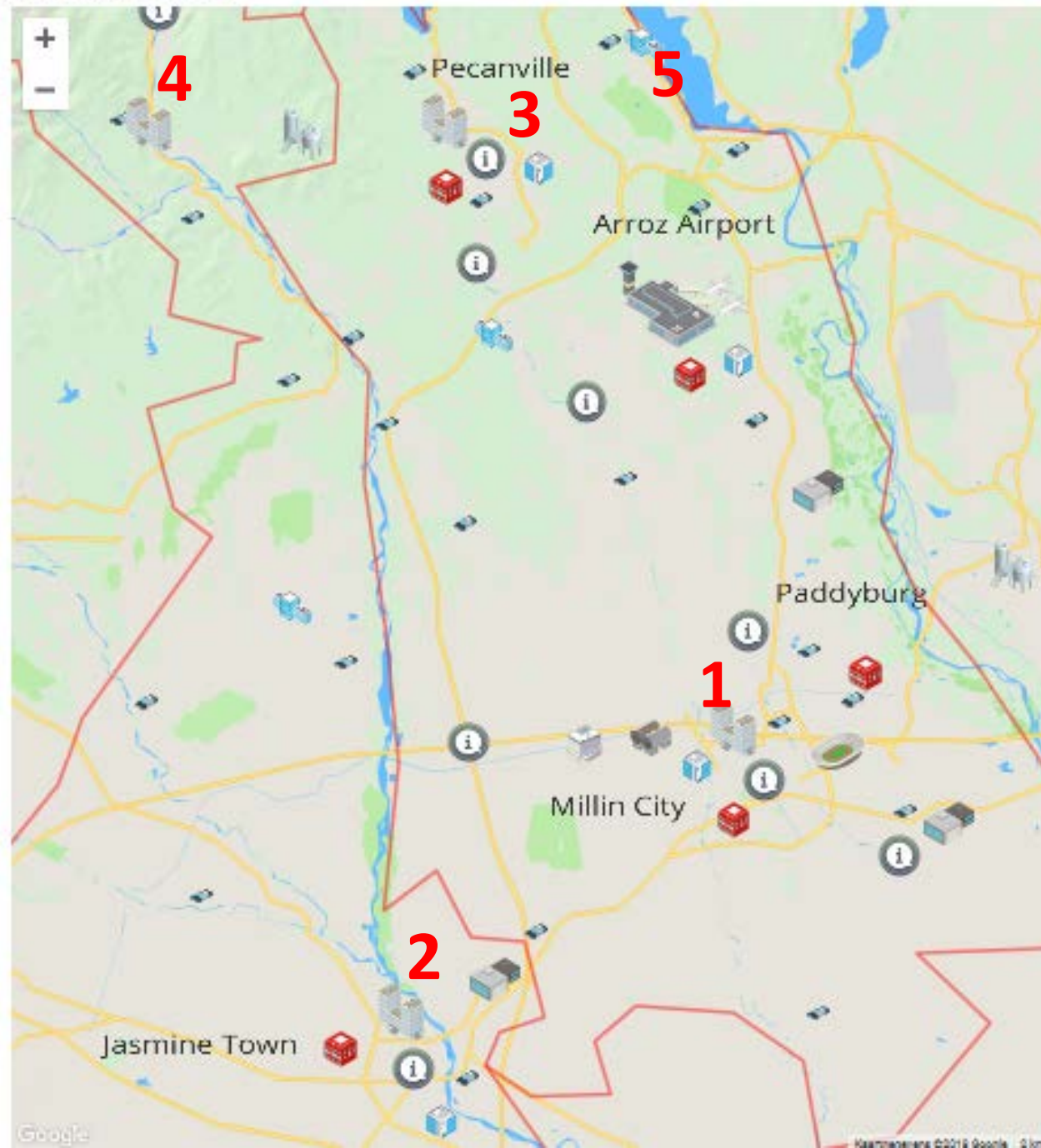


FR RAINWEAR COVERALL MIDWEIGHT, ORANGE FR-118, FR-119, FR-120, FR-121, FR-122	FR-121	
SIZE: SMALL	FR-138	100633
SIZE: MEDIUM	FR-139	100634
SIZE: LARGE	FR-140	871028
SIZE: XL	FR-141	100640
SIZE: XXL	FR-142	100635

Supplies / Equipment

- Number
- Type
- Location (Keys – 24/7 access) Back up keys
- Who secures
- Who positions
- Restrictions/authorisations (Medications)
- How resource acquired
- How resource tracked
- Prioritise order for set-up

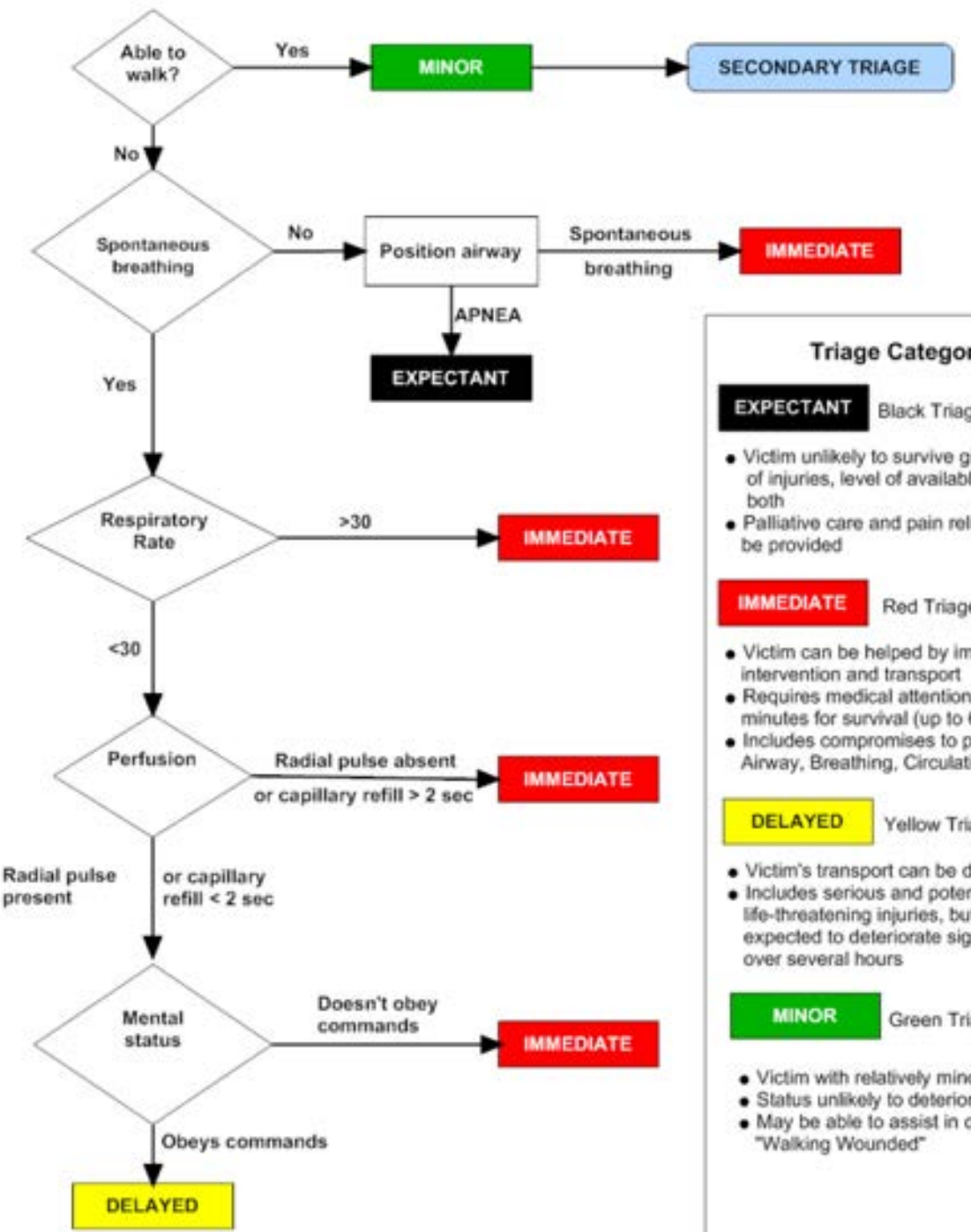
Riceland 2018



- Pre-hospital: **Role physician: present, para-med**
- **On-the-scene triage**
- Level 4: **Green** = Minor, reverse triaged + stabilization before transport
- Level 3: **Green** = Minor, reverse triaged + stabilization before transport
- Level 2: **Yellow, Red**, lower capacity
- Level 1: **Yellow, Red**, higher capacity

Black --- > nearest; IC activates

- **Determined by site and type of MCI**



Triage Categories

EXPECTANT Black Triage Tag Color

- Victim unlikely to survive given severity of injuries, level of available care, or both
- Palliative care and pain relief should be provided

IMMEDIATE Red Triage Tag Color

- Victim can be helped by immediate intervention and transport
- Requires medical attention within minutes for survival (up to 60)
- Includes compromises to patient's Airway, Breathing, Circulation

DELAYED Yellow Triage Tag Color

- Victim's transport can be delayed
- Includes serious and potentially life-threatening injuries, but status not expected to deteriorate significantly over several hours

MINOR Green Triage Tag Color

- Victim with relatively minor injuries
- Status unlikely to deteriorate over days
- May be able to assist in own care: "Walking Wounded"

Pre-hospital Triage

Initial Patient Assessment (should take less than one minute for each patient)

- Interview each patient (or accompany EMT or paramedic) for the main complaint and the location from which the patient is coming from
- Tag each patient (omit personal information on the tag for now and concentrate only on the main complaint, the need for decontamination, and the type of injury) according to the following:
 - Confirmed deceased – Tag Black
 - Unresponsive – Tag Red
 - Severe bleeding or severe injury – Tag Red
 - Minor injuries – Tag Yellow or Green
 - Walking Wounded – Tag Green
 - Possibility of CBRNE-related injury – Note for Primary or Secondary Decon

Activation

- Who? IC, emergency coordinator,...
- When? 'walking wounded' arriving at the hospital, a staff member noticing a breaking news story on the television, or messaging from a regional government agency,...
- Criteria according to level
- National level 118

Disaster Metrics: Quantitative Benchmarking
of Hospital Surge Capacity in Trauma-Related
Multiple Casualty Events

Jamil D. Bayram, MD, MPH, EMDM; Shawki Zuabi, MD, EMDM; Italo Subbarao, DO, MBA

(*Disaster Med Public Health Preparedness*. 2010;4:(doi:10.1001/dmp.2010.19))

HASCS : Hospital Acute care surge capacity = HACSC= (EDB/10)*4.

Notification

- Cascading: texting, pre-allocated, internal + external
- “Attention all staff, a MCI Plan has been called. All staff are to report to their positions and prepare to support the MCI Plan.”

Organization/Department	Point of Contact	Contact Information (phone, email, etc.)	Position Responsible for Notifying
[Fire Department]			
[Hospital CEO]			
[Police Department]			
[City or Special District EMS]			
[Hospitals with which we have mutual aid]			
[Other area hospitals]			
[Ambulance company]			



Plan – Operations Section

- Triage (dual wave – more serious later)
 - Red 20% / Yellow 30% / Green 50% (20% children)
- Treatment (of reds 10% stat emergency surgery)
- Security (ext / int / traffic)
- Patient Processing (alternative registration)
- Communications (personnel and back up system)
- At risk populations
- Mental and behavioural health
- Staff support services

Staffing according to level

Staffing	Minimum Activation	Level I (10-30 patients)	Level II (30-50 Patients)	Level III (50 + Patients)
Clinical/Licensed	5	10	15	20
Support	15	20	25	30

Staffing by incident type

MCI Scenario	Trauma Surgeon	General Surgeon	Orthopedic Surgeon	Neuro Surgeon	Plastic Surgeon	Thor Surgeon	Vascular Surgeon	Internal Medicine	Pulmonary	Infectious Disease	Pediatric	OB -GYN	Hem - Oncology	Radiation Oncology	Behavioral Health
Chemical								X			X	X			X
Biological								X	X	X	X	X			X
Radiologic								X			X	X			X
Nuclear	X	X						X			X	X	X	X	X
Explosive	X	X	X	X	X	X	X	X	X		X	X	X	X	X
Tornado	X	X	X	X	X		X	X	X		X	X			X
Hurricane								X			X	X			X
Flooding								X			X	X			X
Earthquake	X	X	X	X	X	X	X	X			X	X			X
Wildfire		X			X			X			X	X			X
Transportation Crash	X	X	X	X	X	X	X	X			X	X			X

Patient Processing (alternative registration)

- Reverse to paper-based: cfr. communication with lab, radiology,..., paper available?



Security

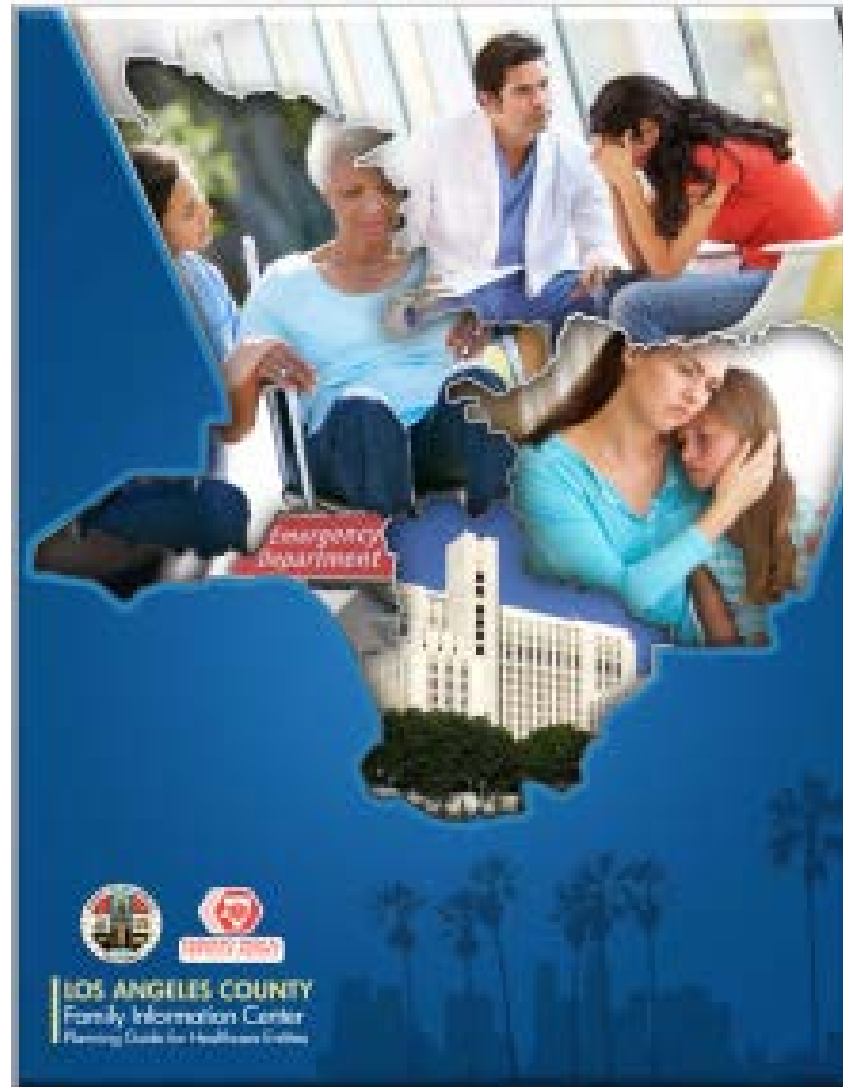


Media and Information Center

- Acquire + spread
- Social media



Family Information Center



Staff support

- Compulsory go home
- Rotation schedule
- Drink, Food
- Rest area's

Psy debriefing?



Transition

- Back to routine