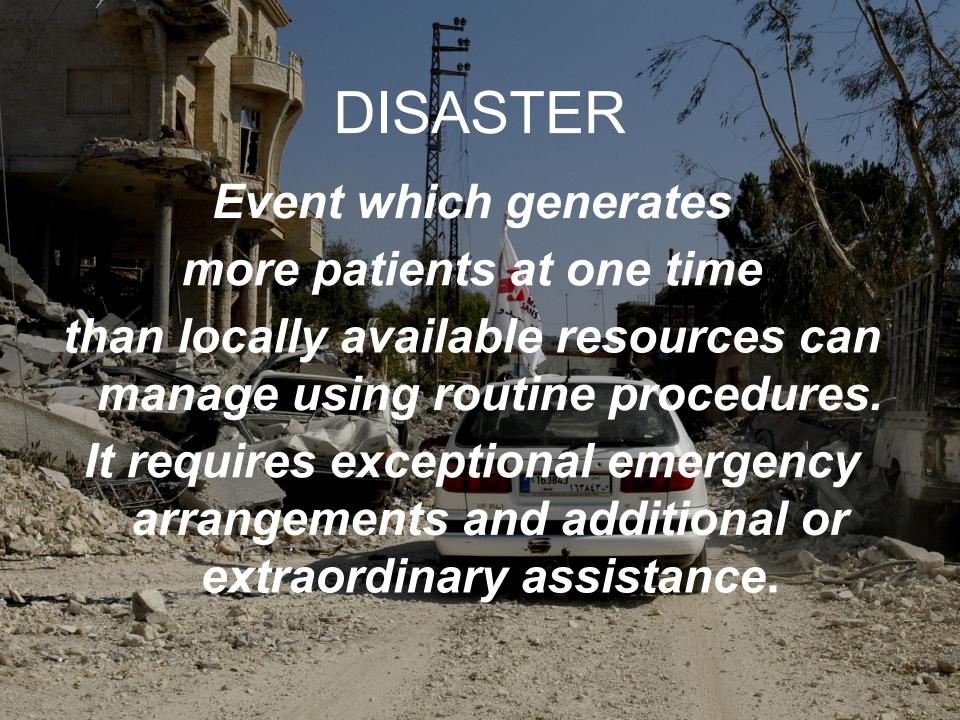
## DISASTER PLAN

AT

THE FIELD LEVEL





## Examples

Plane crash
Traffic accident
Flooding
Forest fire



Armed conflict
Civil war
Bomb attack
Earthquake



# THE CHAIN OF CASUALTY CARE

The path followed by a casualty from the point of injury all the way to specialized care as his condition dictates:

# THE CHAIN OF CASUALTY CARE

- 1. on the scene
- 2. collecting point
- 3. surgical hospital
- 4. specialized centre (including rehabilitation)
- 5. a transport system (e.g. ambulances) for evacuation from one level to another.
- 6. A coordination centre

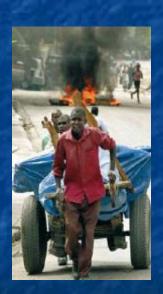
#### Chain of casualty care at the field level

CHAIN OF CASUALT Y CARE	On the scene	Collecting point
Who?	Friends & relatives	First Aiders
	The community	Health professionals
175 K D. C.	First Aiders	Stretcher-bearers
		之前。2018年1月2日2日1日至日本
Where?	At the front lines	Spontaneously chosen:
A. 200 PM	At the epicentre	A school
		A factory
		The shade of a tree
What?	Life-saving measures	Collection of casualties
	Extraction of the wounded	Triage
		Complementary health care
		Stabilization
Water Commen	A STATE OF THE PARTY OF THE PAR	Evacuation planning
		Ambulatory care



On the spot

**Transportation** 





The collecting point



#### The collecting point



1



**Transportation** 



The hospital

### FIRST STEP

- Get an overview of the scene:
  - Security conditions
  - Potential number of patients
  - Severity of the injuries
- Initial report:
  - Location, type of incident, approx number of victims
  - Type of assistance required

## 2<sup>ND</sup> STEP: TRIAGE

Definition

A process of prioritizing patients
based on the severity of their condition
to treat as many as possible
when resources are insufficient for all to be
treated immediately

#### CLASSIFICATION

Severe

Life-threatening condition, treatable and that can be stabilized by means of immediate and simple measures

**Moderate** 

Major but non immediately life-threatening conditions where some delay is acceptable

**Minor** 

Minor injuries requiring minimal care

Supportive

No hope of recovery

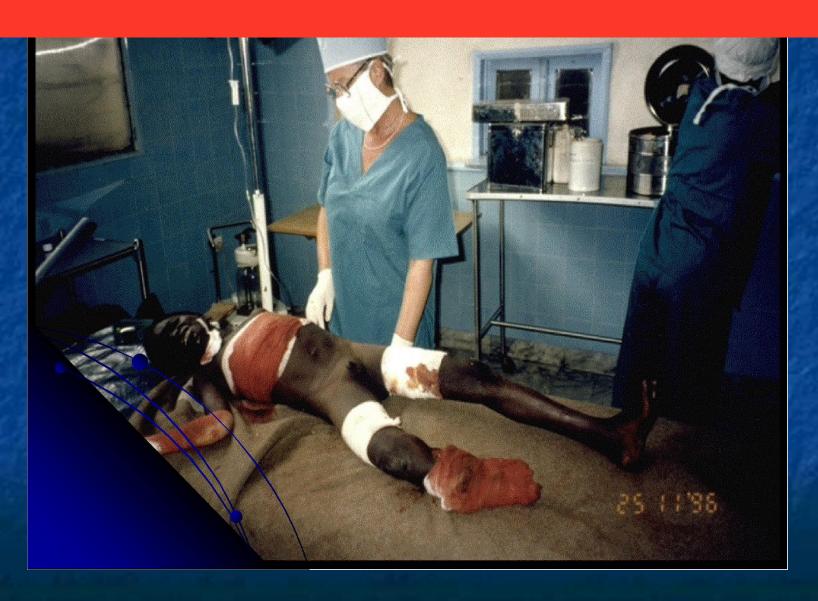
#### **RED** 10%

Priority 1 

Good chance of survival if immediate surgical intervention

- \* Thoracic trauma and respiratory distress
- \* Abdominal trauma and shock
- \* Open fracture with active bleeding
- \* Incomplete amputation, vascular damage with ischemia
- \* Burns 2<sup>nd</sup> 3 degree 15 to 50% TBS

### **RED** 10%



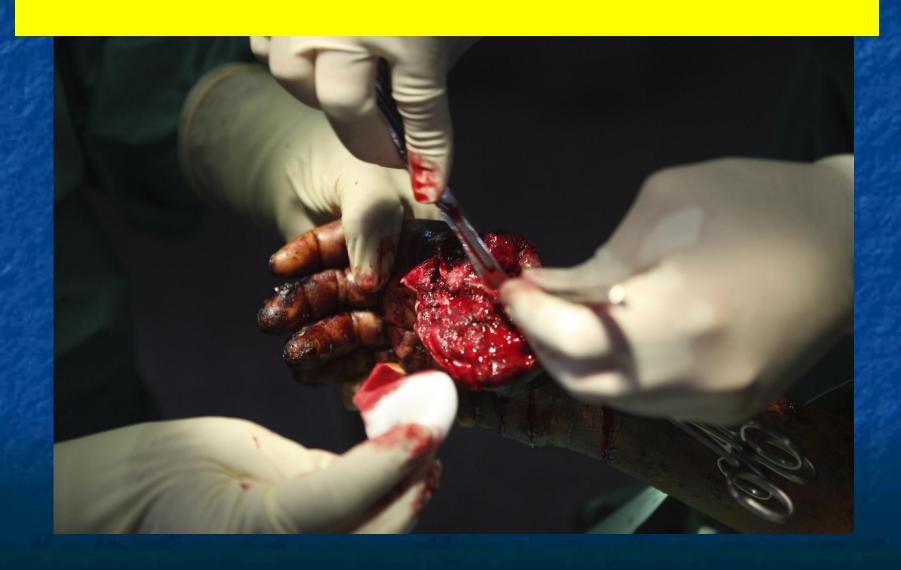
#### YELLOW 30%

Priority 2 

Surgical intervention required but non urgent

- \* Stable abdominal trauma (open or blunt)
- \* War wound requiring debridment
- \* Maxillo-facial wound without respiratory trouble
- \* Open fracture without ischemia without haemorrhage
- \* Spinal trauma with or without paralysis

#### YELLOW 30%



#### GREEN 60%

#### No surgical intervention required

- \* Superficial or minor wound
- \* Burns < 15% TBS
- \* Sprains,...
- \* Psychological trauma

## **GREEN (60%)**





## GREEN (60%)



#### TRIAGE

1. Initial examination

2. Live-saving technique

3. Classification

4. Regular reassessment

- Triage Assessment Exercise
- A plane has crashed at BEIRUT Airport.
  There are many causalities. A call has been made for an MCI alert.
- You are asked to assist with triage

- A 32 y/o man is found lying on the runway
   10 m from the plane.
- R- 10/min
- P- Good distal pulse
- M- Groans to painful stimuli

 A 42 y/o female is bleeding quite a lot from a neck injury..

- R >30
- P- Radial pulse +
- M- Obeys commands

- A screaming woman is found in the grass at the side of the runway.
- R-28
- P- Good distal pulse
- M- Asks you to help her
- Has a partial amputation of the foot without active bleeding.

- An adult male lies inside the plane.
- R- none -apneic
- Remains apneic after lifting the chin

- An older man found sitting outside the plane .
- R: 28
- P: Good distal pulse
- M: Groggy but will slowly follow commands but won't get up and walk.

- An adult male lies on the ground
- R 20
- P Good distal pulse
- M Obeys commands but cries that he can't move his legs

- A young woman has a large head wound with brain matter showing
  - R absent
  - P absent
  - M unconscious

- An adult kneels at the side of the road, shaking his head. He says he's too dizzy to walk.
- R 20
- P CRT 2 sec
- M Obeys commands

- 30 y/o male with shrapnel in chest, short of breath, dusky and can't walk
- R 36
- P radial pulse present
- capillary refill < 2 sec
- M confused

- 28 y/o with foreign body protruding from thigh
- R 28
- P present
- M follow commands

#### Initial examination

- A.B.C.D.E.
  - Long lasting process
  - Supposed a broad experience
  - Inappropriate for multiple victims
- S.T.A.R.T.
  - Takes less than 30 seconds
  - Every rescuer can do it

- Clear the walking wounded
  - Use verbal instructions
  - Direct them to the treatment areas for detailed assessment and treatment
    - Tag These as MINOR
- Now check RPMs

- Respiration's
- None? Open the Airway
  - Still None? → DECEASED
  - Restored? \_\_IMMEDIATE
- Present?
  - Above 30 (or < 10) TIMMEDIATE
  - Below **30**



**CHECK PERFUSION** 

- Perfusion
- Radial Pulse Absent
- Capillary Refill time > 2 secs

#### **IMMEDIATE**

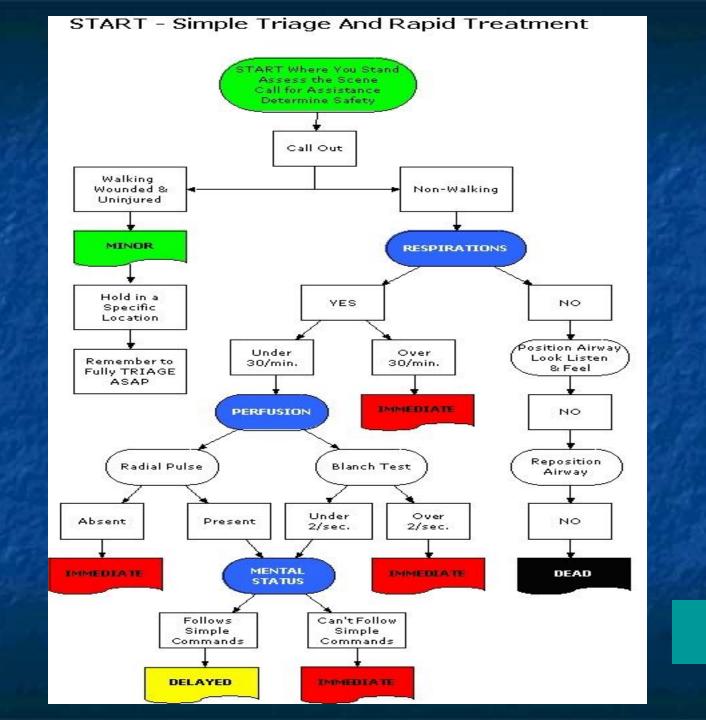
- Radial Pulse Present
- Capillary Refill time < 2 secs
- CHECK MENTAL STATUS

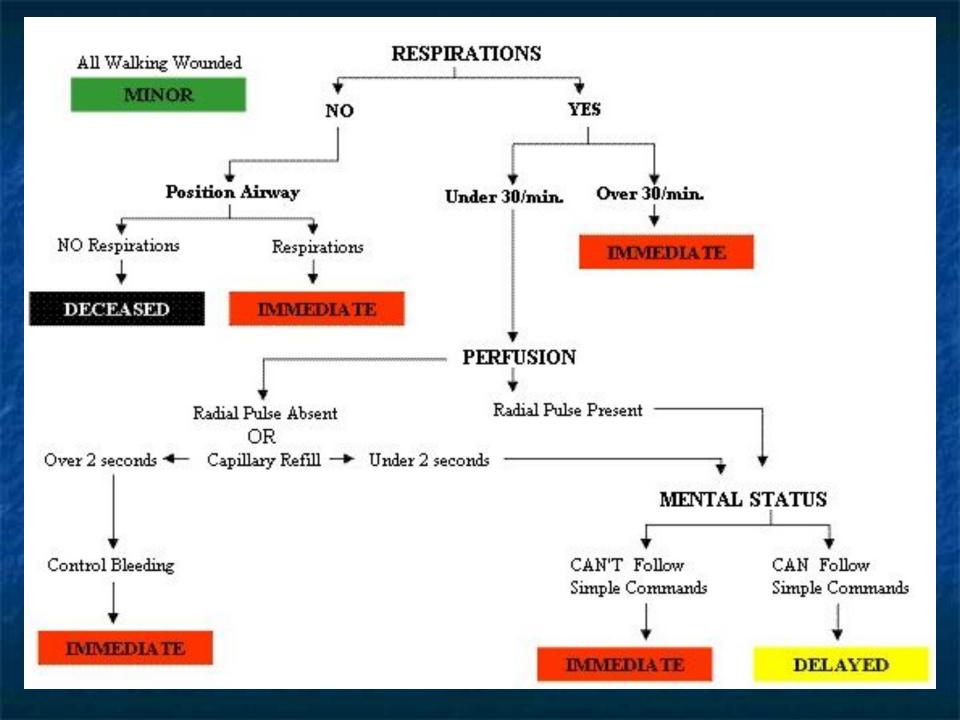
- Mental Status
- Can Not Follow Simple Commands (Unconscious or Altered LOC)

**IMMEDIATE** 

- Can Follow Simple Commands

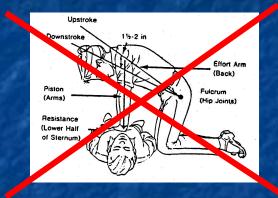
DELAYED





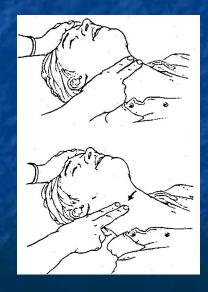
# LIFE-SAVING TECHNIQUE













#### LIFE-SAVING TECHNIQUE

If patient is immediate upon initial assessment, only attempt to correct

- airway blockage
- uncontrolled bleeding



before moving on to next patient.

#### Airway

#### Open the airway

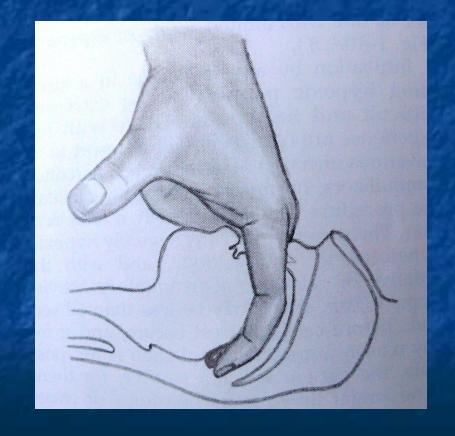
- Tilt the forehead back
- Lift the chin forward
- Be careful in case of cervical spine injury



### Airway

#### 2. Remove all objects/obstructions from the mouth





#### Breathing

You can
Hear it
See it
Feel it



#### Uncontrolled bleeding

- Control Haemorrhage :
  - Compressive Dressing: Large volume of material /gauze placed over or in the wound and held in place securely by a bandage
  - Elevated position
  - Tourniquet

Mamadou 0 K > 30/min > > 2/sec X

O 14h30 K

Blunt abdominal trauma
Retroperitoneal haematoma?
Shock

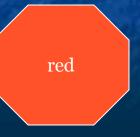
# The triage card



# Respiration restored? Haemorrhage controlled? Patient is tagged?

Dispatch immediately to the appropriate zone

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   10 ft from the plane.
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- M- Groans to painful stimuli



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black

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- R 28
- P present
- M follow commands



#### Questions

#### True or False

- 1. A large majority of injuries are minor
- 2. Minor injuries will often arrive at the hospital first
- 3.The goal of mass casualty triage is to the best for the most
- 4. The most commonly used form of triage allows only 2 interventions- reposition airway and pressure to external hemorrhage
- 5. Triage is a dynamic process and is usually done more than once.

#### Answers

Check your answers regarding "What's your call?" You should be able to triage a patient within 15 seconds.

- If you answered TRUE to the previous questions, you are correct
- Congratulations!