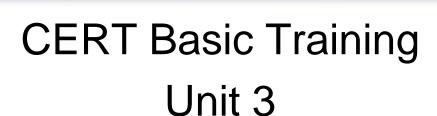


Disaster Medical Operations — Part 1







Assumptions

- Need for CERT members to learn disaster medical operations is based on two assumptions:
 - Number of victims could exceed local capacity for treatment
 - Survivors will assist others
 - They will do whatever they know how to do
 - They need to know lifesaving first aid or postdisaster survival techniques





Importance of Quick Action

- Phase 1: Death within minutes, result of severe trauma
- Phase 2: Death within several hours, result of excessive bleeding
- Phase 3: Death in several days or weeks, result of infection





CERT Training

- Treatment for life-threatening conditions
 - Airway obstruction, bleeding, shock
- Treatment for other, less urgent conditions

Provide greatest good for greatest number by conducting simple triage and rapid treatment





START

he Hie

- STart = Simple Triage
 - Victims sorted based on priority of treatment

- stART = And Rapid Treatment
 - Rapid treatment of injuries assessed and prioritized in first phase





Unit Objectives Total

- Identify "killers"
- Apply techniques for opening airway, controlling bleeding, and treating for shock
- Conduct triage under simulated disaster conditions





Unit Topics

to Lie

- Treating life threatening injuries
- Triage







Three "Killers"

- Emergency medicine "killers"
 - Airway obstruction
 - Bleeding
 - Shock
- First priority of medical operations:
 - Open airway
 - Control excessive bleeding
 - Treat for shock





How to Approach a Victim

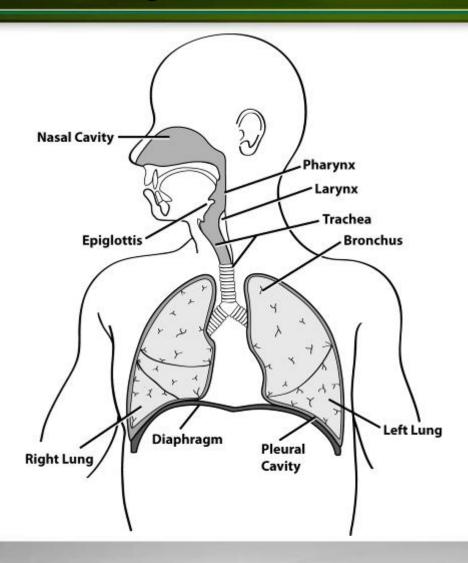
- Be sure victim can see you
- Identify yourself
 - Your name and name of your organization
- Request permission to treat, if possible
- Respect cultural differences







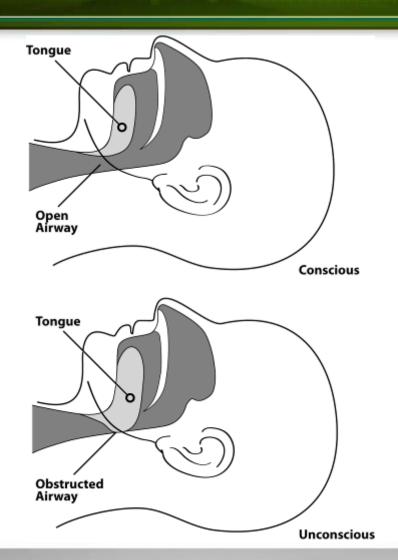
Open the Airway







Open vs. Obstructed Airway







Head-Tilt/Chin-Lift Method







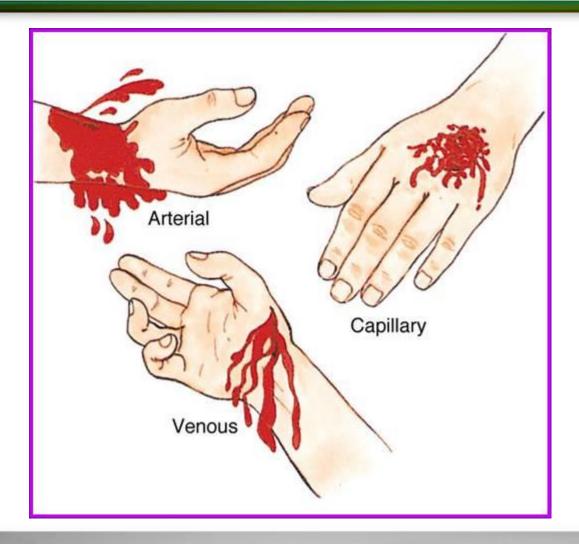
Types of Bleeding - 1

- Arterial bleeding
 - Bleeding from artery spurts
- Venous bleeding
 - Bleeding from vein flows
- Capillary bleeding
 - Bleeding from capillaries oozes





Types of Bleeding - 2







Control Bleeding

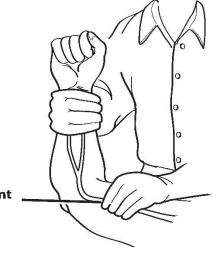
- 3 main methods for controlling bleeding:
 - Direct pressure
 - Elevation
 - Pressure points



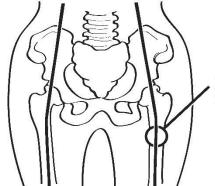




Pressure Points



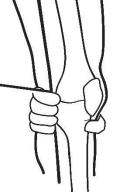
Brachial Pressure Point just above the elbow



Femoral Pressure Point

in the Upper thigh









Shock

to Tre

- Result of ineffective circulation of blood
- Remaining in shock will lead to death of:
 - Cells
 - Tissues
 - Entire organs







Recognizing Shock

- Main signs of shock
 - Rapid and shallow breathing
 - Capillary refill of greater than 2 seconds
 - Failure to follow simple commands, such as "Squeeze my hand"
- Symptoms of shock are easily missed...
 pay careful attention to your patient!





Responding to Mass Casualty Event

- Have a plan
- Follow that plan
- Document your actions throughout

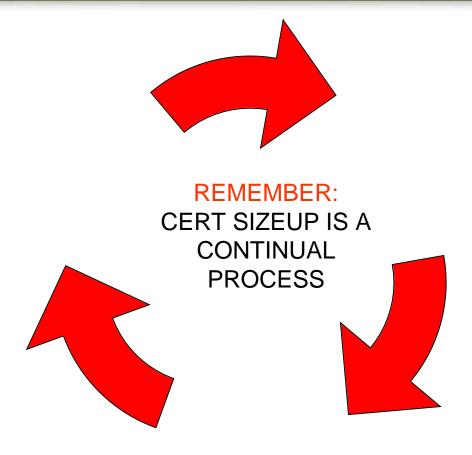






CERT Sizeup

- Gather Facts
- Assess Damage
- 3. Consider Probabilities
- 4. Assess Your Situation
- 5. Establish Priorities
- 6. Make Decisions
- 7. Develop Plan of Action
- 8. Take Action
- Evaluate Progress







What Is Triage?

- Process for managing mass casualty event
 - 1. Victims are evaluated
 - 2. Victims are sorted by urgency of treatment needed
 - Victims are set up for immediate or delayed treatment





Triage Malu

- Immediate (I): Victim has life-threatening injuries (airway, bleeding, or shock)
- <u>Delayed (D)</u>: Injuries do not jeopardize victim's life; treatment can be delayed
- Minor (M): Walking wounded and generally ambulatory
- Dead (DEAD): No respiration after two attempts to open airway





Rescuer Safety During Triage

- If hazmat or terrorist event is suspected, CERT members DO NOT respond
 - Evacuate as safely as possible
- ALWAYS wear PPE:
 - Helmet
 - Goggles
 - N95 mask
 - Work gloves
 - Sturdy shoes or boots
 - Non-latex exam gloves





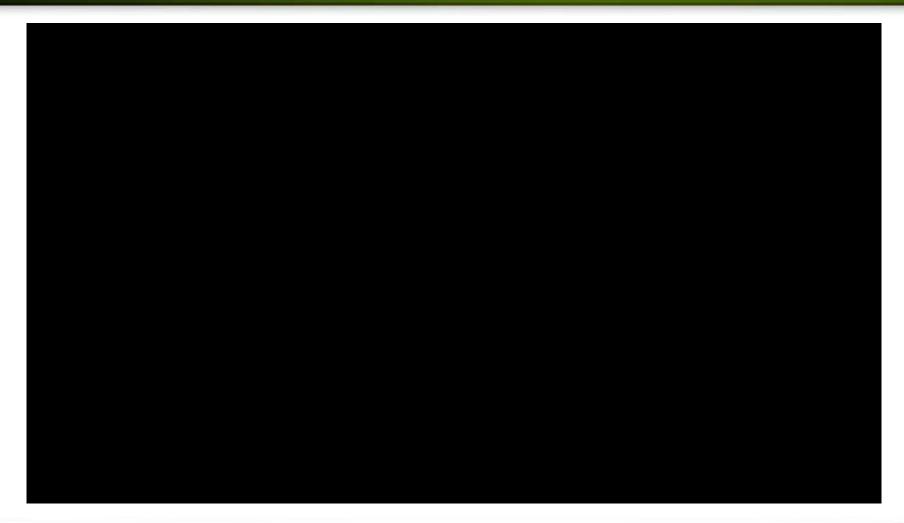
Triage Process

- Step 1: Stop, Look, Listen, and Think
- Step 2: Conduct voice triage
- Step 3: Start where you stand; follow systematic route
- Step 4: Evaluate each victim and tag
- Step 5: Treat "I" victims immediately
- Step 6: Document triage results





Triage Process







Step 4: Triage Evaluation

- Check airway and breathing
- Check circulation and bleeding
- Check mental status





Triage Pitfalls

- No team plan, organization, or goal
- Indecisive leadership
- Too much focus on one injury
- Treatment (rather than triage) performed







Unit Summary has been

- You should now be able to:
 - Identify 3 "killers"
 - Apply techniques for opening the airway, controlling bleeding, and treating for shock
 - Conduct triage under simulated disaster conditions







Homework Assignment

- 1. Read unit to be covered in next session
- 2. Bring necessary supplies for the next session
- 3. Wear appropriate clothes for the next session



