# SECTION 13 MEDICAL ASSISTANCE

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#### 1. **DEFINITIONS:**

#### 1.1 Medical Disaster:

A medical disaster is defined as an incident where community's medical resources are taxed beyond their normal limits.

## 1.2 Central Ambulance Communications Center (CACC):

- Central Ambulance Communications Center is located in Wallaceburg.
- CACC dispatches the Lambton County Ambulance Service and Lambton County Fire/Rescue Departments.
- Sarnia Fire/Police Dispatch notifies and updates CACC as required.

#### 1.3 Paramedic:

- Personnel who responds for the Lambton County Ambulance Services

# 1.4 Incident Site Manager:

- Person who is designated to oversee the entire on-site response and coordinate the efforts of all responding agencies
- Within the CVECO organization, this would be the Incident Commander

#### 1.5 Ambulance Site Coordinator:

- The Senior Paramedic of the first responding ambulance assumes this role. It may be transferred to an ambulance supervisor or manager upon their arrival at the emergency scene.
- When this role is established at an incident, the CACC Dispatcher must be advised of the person filling the role and of any changes taking place.
- Within the CVECO organization this person would report to the Mobile Command Post and fill the role of Ambulance Incident Commander

#### 1. **DEFINITIONS:** Continued

#### 1.6 Ambulance Traffic Control Officer:

This role is assigned to a Paramedic after the Triage Officer, if more ambulances than the initial response are being requested.

## 1.7 Triage Officer:

- This role is assigned to one or more of the first arriving Paramedic.
- This role may start with an industry responder and responsibility transferred to a Paramedic when they arrive on scene.
- If more than one Triage Officer has been assigned then the additional role of "Triage Coordinator" must be assigned to one person to oversee the coordinated triage of the entire scene.

# 1.8 Safety Officer:

- The ambulance service may appoint a Safety Officer to ensure ambulance personnel are taking the necessary measures to protect themselves.
- If sufficient ambulance manpower is not available, this task may be added to the (municipal/industrial) on-scene Safety Officer role.

# 1.9 Landing Site Coordinator:

Role of a person (fire, police, industry, or ambulance service) to coordinate the safe landing of a helicopter to evacuate casualties from the emergency scene.

## 2. INDUSTRY REQUESTING AMBULANCE ASSISTANCE:

- 2.1 Ambulance responses would not normally require a Code 8, however incidents involving multiple injuries would.
- 2.2 If a Code 8 is issued, complete the CVECO Code Notification Checklist and fax to Sarnia Fire/Police Dispatch
  - Reference Section 8 Code 8 Noticeable Occurrence for more details
- 2.3 Calls received by Sarnia Fire/Police Dispatch (911) for medical assistance are transferred to Wallaceburg to the Central Ambulance Communications Centre, (CACC).
  - The request for medical assistance may activate the tiered respond system where municipal Fire and/or Police may be dispatched to the scene.
- 2.4 When requesting ambulance response be prepared to answer the following questions when asked by the CACC Dispatcher.
  - Ambulance Service for what City or location?
  - Name of plant and person who is calling and the telephone number at which they can be reached?
  - Is the patient conscious? Breathing? Bleeding?
  - What is the nature of the emergency?
  - Number of people injured
  - Provide clear instructions on the location and address of the plant
  - What happened (explosion, fire, gas release)
  - Wind direction and speed.
- 2.5 The Dispatcher will then dispatch an ambulance to the appropriate industry and address given so approach can be made from a safe direction.
- 2.6 Details provided will allow for an appropriate number of ambulances to be dispatched and an alert to be sent out to all hospitals advising them of the situation.
- 2.7 The hospitals will then have time to prepare themselves for the number and types of casualties.

## 3. **CVECO MEMBER PROCEDURES:**

- 3.1 Each CVECO member is expected to have internal emergency procedures that will outline their requirements when medical aid assistance is required.
- 3.2 As a minimum the procedures will include.
  - Information the Plant Dispatcher is to provide CACC Dispatch.
  - Notification of plant personnel who may be of assistance in the emergency.
  - Personnel assigned to meet and escort the ambulance to the medical scene
  - Staging area if multi-ambulance response is required.
  - Safe access and exit routes to and from the scene.
  - How to deal with a "pronouncement in the field"

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#### 4. TIERED RESPONSE AGREEMENT:

- 4.1 Lambton County EMS Service and the Sarnia Fire & Rescue Service have a tiered response agreement.
- 4.2 Tiered response comes into effect should the ambulance service/system become overwhelmed to the point that an ambulance cannot be dispatched and reach the scene within ten minutes (10 minutes) of receiving a Code 4 response (life-threatening call).
- 4.3 If the call type is one agreed upon by the Fire Department and the Ambulance Service (e.g. cardiac arrest, patient requiring extrication), the Sarnia Fire & Rescue will be requested to respond and assist until the arrival of the ambulance.

## LAMBTON COUNTY MEDICAL RESPONSE: **5.**

- 5.1 Lambton County Medical Services will respond ambulance according to the information provided by the CVECO member.
- 5.2 For multi-casualty incidents, the Ambulance Service will up-grade the response accordingly and contact the Lambton Hospital Group of the situation.
- 5.3 The Ambulance Service may provide an Ambulance Site Coordinator who will act as their Incident Commander and work out of the Mobile Command Post. A Triage Officer who will coordinate the triage activities at the scene and a Traffic Control Officer if more vehicles are being requested.
- 5.4 The coloured identification vests they will wear at the emergency scene identify the Ambulance Service coordinators.
  - Lime Green Vest Ambulance Site Coordinator (Incident Commander)
  - Orange Vest Traffic Control Officer
  - Orange Vest Triage Officer
  - Orange Vest Paramedic
- 5.5 CVECO members with medical facilities may treat walking wounded to prevent the hospitals from being overwhelmed with casualties
- 5.6 The Lambton Hospital group will implement their internal emergency procedures to handle the incoming casualties.
- 5.7 The casualties will be sent to any one of the following Lambton County **Hospital Group locations** 
  - Sarnia General site on Mitton Street
  - St. Joseph's site on Russell Street
  - Charlotte Eleanor Englehart site in Petrolia
  - Wallaceburg (as warranted)
  - Strathroy (as warranted)

## **INDUSTRY REQUESTING AMBULANCE STAND-BY:** 6.

- 6.1 In cases where a major event has happened, and no injuries have occurred but the potential still exists for people to become injured, a call to the Ambulance Dispatch using the 911 system is appropriate.
- 6.2 Give the details of the event to the Ambulance Dispatcher and an ambulance, if available, will be placed on standby at your plant or at a safe location nearby.

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## 7. **INDUSTRY MEDICAL SERVICES:**

- 7.1 CVECO members with medical facilities may treat walking wounded to prevent the hospitals from being overwhelmed with casualties during multicasualty events.
- 7.2 The following companies have medical facilities with treatment beds, a nurse and first aid responders.
  - Bayer Inc.
  - **Dow Chemical**
  - Imperial Oil
  - Nova Corunna
  - Nova Sarnia
  - Nova St. Clair
  - Shell Refinery
  - Sunoco Refinery Inc.
- 7.3 The industry medical staff network through their "Environmental Association Health Professional organization.

#### 8. CHEMICAL CONTAMINATION:

- 8.1 Lambton County EMS personnel will not transport a patient who is contaminated with a chemical.
- 8.2 As part of their first aid procedures, CVECO member should have the patient decontaminated by removing the casualties clothing (if required) and ensuring the patient has been washed clean in a safety shower or by some other means to remove any chemical contamination.
- 8.3 Decontamination equipment is available if required. Information on obtaining it is found in Section 14 - Hazardous Materials & Decontamination.
- 8.4 If any chemical(s) are involved fax MSDS product information to the Sarnia Fire/Police Dispatcher. To the CACC Operations Centre and to the Sarnia General Hospital.
  - Sarnia Fire / Police Dispatcher Fax 344 8789
  - Sarnia General Hospital Fax 339 7264
  - Central Ambulance Communications Centre Fax 519 627 9918
- 8.5 The CACC Operations Center Dispatcher can be contacted by telephone for non-emergency calls by calling - 519 - 627 - 1678

## 9. TRIAGE TAGS:

- 9.1 Triage is assessing patient injuries, tagging them with emergency services triage tag to assist in treatment priority.
- 9.2 CVECO members with first aid responders may assign someone as a Triage Officer until relieved of that role by a responding Paramedic.
- 9.3 Triage tags are generally placed on the patients left wrist, or if an amputation has occurred, the right wrist.
- 9.4 The tags also have a master numbering system so no two tags have the same number.
- 9.5 Tags have tear off sections, to make it easier to track patients by their tag number.
- 9.6 CVECO members who use triage tags should use the same tags as the Lambton County Ambulance Service.
- 9.7 The triage tags can be obtained through the CAER Administrator.

# 10. TRIAGE CATEGORIES:

Patients are triaged into the following categories;

# 10.1 **RED** Immediate:

- Patient has a life threatening injury/illness
- High probability of survival if transported immediately and receive definitive care within 30-60 minutes
- Patients with injuries with poor chance of survival (crushed chest, crushed skull, 3<sup>rd</sup> degree burns greater than 50% or 2<sup>nd</sup> degree greater than 75%) are still tagged red, but are the last reds to be transported

# 10.2 YELLOW Urgent:

- Patient has a potentially life threatening injury/illness
- Delay of definitive care 2-3 hours is not anticipated to threaten outcome

# 10.3 **GREEN** Delayed:

- Patient does not have a potentially life-threatening injury-illness
- Extended delay in receiving definitive care should not threaten outcome

# 10.4 **BLUE** Deceased:

- Patient is obviously deceased
- Patient is in cardiac arrest or respiratory arrest and you lack sufficient personnel to perform resuscitation.

## PRONOUNCEMENT IN THE FIELD: 11.

- 11.1 The responding Paramedic after consultation with the Base Hospital Physician, may, if the situation warrants, make a field pronouncement.
- 11.2 Pronouncement may be made if in the medical judgement of the Base Hospital Physician, the patient has died and initiation of medical treatment by Paramedics is not appropriate, or the patient has died and continued treatment of the patient would be ineffective and therefore, inappropriate.
- 11.3 In all cases of sudden death, the Police must be notified and attend at the scene. In the case of a field pronouncement, the Paramedic will not leave the scene until a Police Officer arrives.
- 11.4 The CVECO member should leave the scene undisturbed and secure the area to prevent any personnel from entering the area until the Police arrive.
- 11.5 It is then the Police Officer's responsibility to notify the Coroner and make the arrangements for the removal of the body.

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## **HELICOPTER ASSISTANCE:** 12.

- 12.1 If a helicopter is required to evacuate a casualty, the need or request will be coordinated though the Lambton County Ambulance Service and CACC.
- 12.2 If a helicopter is to land at a designated site to evacuate a casualty a "Landing Site Coordinator" must be appointed to coordinate the safe landing of the helicopter.
- 12.3 Fire, Police, Ambulance or industry personnel based on available manpower may fill role of the Landing Coordinator.
- 12.4 The Landing Coordinator must wear the following safety equipment
  - High visibility vest or coat
  - Secured safety helmet with visor
  - Safety goggles or glasses

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#### **13**. **HELICOPTER LANDING SITE:**

- 13.1 The helicopter's pilot-in-command is responsible for selecting the landing site and has the final decision on whether or not to land.
- 13.2 Using the helicopter's airborne vantage point, the pilot will select the site that best meets the following conditions.
  - At least 33 meters x 33 meters (100' x 100') is required for the helicopter to land.
- Note: Gravel and sand sites should be avoided if possible, due to the potential of injury from flying dust particles and reduced visibility.
  - A safety area outside the helicopter landing area, extending an additional 33 meters (100') for the purpose of controlling vehicle and personnel access during landing and take-off
  - The selected site will not affect the rescue effort underway
  - The site should be away from overhead wires or utility poles
  - The landing surface should be as flat as possible
  - No lose debris should be within the landing site or the safety area.