

States Band Together to Prepare for Medical Catastrophes



“Our mission today is to set up a field hospital to triage, treat and transport patients, either by air or by ground, at the Westover Air Force Base where they will then be retriaged and distributed throughout Northeast hospitals and trauma centers.”

The triage area included Connecticut’s 25-bed capacity DRASH field hospital, named after Ottilie W. Lundgren, the Connecticut resident who died in 2001 due to a case of inhalation anthrax. The rapidly deployable medical treatment facility uses state-of-the-art technol-

ogy, including digital x-ray equipment, mobile intensive care unit equipment, medical laboratory testing equipment and a full compliment of voice and data communications equipment.

“DRASH is very flexible so we were able to set up a footprint that allowed us to fit the operations to what the needs were and also have plenty of room to work in terms of being able to handle a surge of 75 to 100 patients,” says James F. Wiley II, MD, Chief Medical Officer for Connecticut’s Federal Disaster Medical

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WHAT IF A MAJOR DISASTER WERE TO hit Southern New England, sabotaging power lines, closing highways and debilitating hospitals?

On Saturday, May 19, 2007 medical specialists from Connecticut, Massachusetts, and Rhode Island got together with Army, Air Force, Marine Corps, Navy and Air National Guard volunteers at Westover Air force Base to participate in a simulation exercise designed to deal with just such a crisis.

“The scenario is that a major hurricane hits Hartford and does some severe damage to a hospital that needs to be evacuated. Other major injuries are also evoked from a building collapse,” says Len Guercia, Jr., Chief of the Connecticut Department of Public Health’s Operations Branch.

ABOVE: A civil air patrol “victim” makes his way into the emergency treatment facility. RIGHT: A “wounded” patient is readied for transport at Westover Air Force Base during the Team Yankee drill. BELOW: A 25-Bed DRASH Shelter complex provides a fully-stocked treatment complex for triage and treatment during the disaster readiness drill.



Is Your Emergency Plan Disaster Proof?

Reeves adds disaster planning to its regular product line.



Areas still flooded two weeks after Hurricane Katrina struck in and around New Orleans. Photo by SFC William Armstrong.

IT’S NOON IN ANY TOWN, USA. PEOPLE go about their business, shopping in the small strip mall off the main road, chatting in front of the neighborhood smoke shop and taking a lunch break at the local deli. Winds have been picking up all day and there is word of hurricane activity somewhere in the Atlantic, but no immediate danger is anticipated. The town is located hundreds of miles away from both the Atlantic and Gulf Coasts. Residents are calm. They figure they are pretty safe. Around 10 pm that night the rains begin. At first, it’s just a slow drizzle. By midnight, the winds pick up and rain starts to come down in earnest. Boats are rocking up and down in the nearby river harbor. By morning people start to get worried as water slowly creeps onto the streets. Twenty-four

hours later, the river has risen twenty-two feet and residents are facing a full-scale evacuation.

Fictional scenario, or is it? On September 18, 2004, remnants of Hurricane Ivan – which had battered Florida and other coastal states – led to the worst case of river flooding in 40 years in the small town of Marietta, Ohio. Because of its inland location, residents did not anticipate the foul-smelling flood water, which swamped many businesses before the Ohio River crested the next day, and caused extensive damage. Three years later, the town has rebuilt itself to FEMA requirements and has a practical strategy and a plan that will keep such an event, quite literally, at bay.

The probability of a hurricane wreaking

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Volunteer “patients” wait their turn at the doors of the DRASH Medical Facility to get injury assignments for the Team Yankee drill.

Assistance Team (CT-1 DMAT).

Volunteers were given a casualty profile and had moulage applied to simulate their injuries. They were then transported to the field hospital where medical personnel evaluated their condition. Code red patients were air lifted on a C-130 Hercules Medivac to nearby trauma centers.

“We’re seeing all types of patients in terms of trauma,” says Wiley. “Older patients who have heart complaints or stroke, a person who was injured by a generator, ankle sprains, snake bites, nausea, vomiting, diarrhea. We’ve also had some mental health crises in addition to rape victims.”

So could this type of situation really happen?

“This is actually replicating somewhat what happened in places like the New Orleans Airport, where injured victims were brought from the scene to an aid station,” says Guercia. “The Connecticut Field Hospital is filling that role today.”

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major havoc in the United States has escalated incrementally since Hurricane Floyd hit the East Coast in 1999. Although much is made of the vulnerability of coastal cities, particularly those hit hardest by Hurricane Katrina, those are not the only ones affected. A thirty-year National Hurricane Center Study shows that from 1970 to 1999, more deaths resulted from inland flooding caused by rain due to hurricanes than from the storm surges and wind effects of the hurricanes as they came onshore. With June 1 as the official start of the 2007 hurricane season and the Federal Emergency Management Agency projecting as many as 17 named tropical storms this season with a 75 percent chance of a major hurricane hitting the United States, the potential for a hurricane-related disaster could be high this year for many locations, even those off shore. But emergency preparedness means not only preparing for the next hurricane. Depending on the location, other disasters, such as tornadoes, earthquakes, wildfires, epidemics and terrorist attacks should just as likely be in the forefront of a organization’s disaster preparedness plan.

Escape routes and logistics, what to do in case of power failure, distribution of food, water and medication to evacuees, mitigating crime without adequate security, and keeping decedents from spreading disease in the absence of adequate refrigeration are only some of the questions that officials might face when dealing with either a small

or large-scale disaster. Additionally, those who want to qualify for Federal aid are faced with making sure their plans and procedures conform to the National Incident Management System (NIMS) as well as applicable state or local ordinances and regulatory requirements. It’s a monumental task that affects thousands of lives should such an emergency take place.

Additionally, even the best laid plans may not work if it is not put into practice.

“In most cases, you’ve got a plan, but it sits on a shelf somewhere and it is completely forgotten until it’s too late,” says Chris Murphy, emergency planner for Reeves. “The key to making it usable is exercising the plan. You can do drills, introductory training sessions or run table top exercises where you get all the key players together and run them through different scenarios.”

The Reeves professional Emergency Management Planning Team is comprised of knowledgeable planning experts that perform preliminary risk assessments and impact analyses, develop response and recovery plans and ultimately help organizations practice the final plan’s design and execution – all in conformance to NIMS and all applicable federal, state, or local ordinances and regulatory requirements.

To find out more about Reeves Emergency Management Planning Services and how you can put together a practical disaster plan for your organization, visit www.reevesems.com/planning.html.



Hurricane Katrina survivors line up in their cars for financial aid at the Red Cross Processing Center in St. Charles Parish, Louisiana, during the state’s relief effort.

Reeves Gear Bags Come in All Shapes and Sizes

FOR MANY, THE REEVES name is synonymous with decon and patient movement. Products such as Reeves flexible stretchers, the Reeves Sleeve and quickly deployable decontamination shelters have been televised nationally during rescue efforts requiring versatility, superior materials and product design.

Equally versatile, but lesser-known, is Reeves' full line of fire and emergency medical services gear bags. Since 1992, the company has been designing and manufacturing gear bags for EMS, police and fire departments within the United States. Currently, the company lists twelve types of gear bags in its regular product offerings and manufactures more than 100 bags a month for customers ranging from local fire, EMS and police departments to 3M.

Items such as the Step In Gear Bag are specifically made for the time-conscious firefighter who doesn't have time to don or doff clothing and put it away.

"The beauty of this product is that you just step inside the



A member of the Walkersville Volunteer Fire Rescue Department carries a Reeves First Call VII Trauma Bag.

bag, pull off or put on your gear, and you're ready to go," says Joe Bleach, production manager for Reeves.

Another product that was initially custom designed but is now a part of the Reeves line is the EZ Risor fire hose bag.

"It's very practical," says Joe. "A fireman



can place a fire hose inside and use it to carry the hose up a ladder or flights of steps so that it can be easily hoisted to wherever it needs to be."

Other items include the First Call CO2 Duffel Bag, manufactured to store and remove a CO2 air tank, and Reeves Trauma Bags, which are made specifically to secure instruments and gear required during trauma situations.

"A lot of our bags were designed by the customer to accommodate a need," says Joe.

For a minimum order of 25 pieces, Reeves also creates custom bags to accommodate regional or local fire and EMS departments, complete with the departments' logos and other insignia.

"Just tell us what you want, and we will suggest ways to put that into product form," says Joe.



TOP: The First Call V02 Trauma Bag includes reflective tape, plenty of pockets and an additional compartment for an air cylinder. BOTTOM: The Reeves Nylon Fire Gear Bag can be screen printed and allows enough space to store boots, helmets or gloves. BOTTOM CENTER: A Reeves EMT Holster holds essential small tools needed for emergency medical treatment.

Visit www.reevesems.com/gearbags.html for product photos and descriptions of Reeves gear bags.

PRODUCT WATCH

Product Enhancement

Reeves has added inlet and outlet connections to all of its Box Style Waste Water and Fresh Water Bladders sold after May 2007. Reeves Bladders hold from 110 - 10,000 gallons of fresh or waste water to use when running decontamination systems, hygiene showers or sinks in the field. The new inlet and outlet connections include shut off valves that ensure filling and emptying without spillage. Each bladder comes with a Bladder Adaptor Kit. A Bladder Retrofit Kit is available for bladders sold before May 2007.



LEFT: Fresh Water Bladder with Adaptor Kit. TOP: Bladder Retrofit Kit

New! On the Market

Reeves has added a small propane hot water heater to its product line up. The 105,000 BTU water heater provides a reliable and affordable way to supply hot water in a matter of seconds to a one or two person decontamination shower, hygiene shower or hygiene sink for increased safety and comfort in the field. More specific details about the new water heater may be found at www.reevesems.com/heatingcooling.html.



Reeves product descriptions and photos are available at www.reevesems.com. To order any Reeves product contact Reeves EMS at 800.328.5563 or send your request to Dave Whiting at dwhiting@reevesems.com.

FDNY Rescue Workers Use Reeves Sleeve to Rescue Woman from NYC Sidewalk Grating

AT 7 AM ON MAY 18 JESSICA HINKSMON from Englewood, NJ was on her way to work when a sidewalk grating suddenly gave way on 51st Street in Manhattan.

The 26-year-old fell 15 feet just inches away from steel wires carrying 13,000 volts of electricity.

Because she suffered serious neck and back injuries, FDNY rescue workers successfully used the Reeves Sleeve II to extricate the victim from the narrow 3 x 6 foot space.



Still shot of a Channel 11 news broadcast. FDNY rescue worker demonstrates for cameramen how to apply the Reeves Sleeve.

ABOUT REEVES EMS

For more than 100 years the Reeves name has been synonymous with quality emergency medical products and accessories. The company's current product line includes fully-operational rapidly deployable emergency treatment facilities; command and control shelters and trailers; decontamination shelters, suits and accessories; patient movement equipment, disaster consulting services; and gear bags. Reeves EMS mass casualty systems have been deployed as part of the U.S. Homeland Defense initiative to terrorist incident locations and in disaster recovery situations. Additionally, a large number of mobile medical decontamination systems have also been sent to emergency response organizations in the United States and around the world, including departments of the U.S. Army, Navy, Air Force and Army Reserve; state, county and local government entities; U.S. corporate entities; and international companies. The company's employees work primarily out of its two facilities in Frederick, Maryland, where Reeves manufactures its decontamination products and emergency medical equipment. To find out more about the company and its products, visit www.reevesems.com, send us an email at info@reevesems.com or contact a customer representative at 800.328.5563.

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