

**Sutter Medical Center, Sacramento  
Safety & Emergency Management Orientation Booklet**

**Sutter Medical Center, Sacramento  
Safety & Emergency Preparedness  
Orientation  
For New Physicians**

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Internal Events	How does it impact you?	Response
<b>Code Red</b> Fire	<ul style="list-style-type: none"> <li>• "RACE" if you discover the fire. Offer assistance if you are in the immediate area of the fire.</li> <li>• High potential in OR.</li> <li>• Potential injury of your patient.</li> <li>• Access Control may be implemented.</li> </ul>	<ul style="list-style-type: none"> <li>• Rescue, Alarm, Contain, Extinguish or Evacuate (RACE)</li> <li>• Be aware of prevention measures in OR.</li> </ul>
<b>Code Gray</b> Security event, Violent person (Internal or External) <b>Code Silver</b> Person has a weapon	<ul style="list-style-type: none"> <li>• Need to be aware if you are in the hospital.</li> <li>• Access Control may be implemented.</li> </ul>	<ul style="list-style-type: none"> <li>• Need to stay where you are, do not move about the hospital.</li> <li>• Secure the door to the area if possible.</li> </ul>
<b>Code Pink/Purple</b> Abduction	<ul style="list-style-type: none"> <li>• Need to be aware if you are in the hospital.</li> <li>• Access Control may be implemented</li> </ul>	<ul style="list-style-type: none"> <li>• Be observant for people with infants or bags they could fit in.</li> </ul>
<b>Code Yellow</b> Bomb Threat	<ul style="list-style-type: none"> <li>• Need to be aware if you are in the hospital.</li> <li>• Access Control may be implemented</li> </ul>	<ul style="list-style-type: none"> <li>• Report unusual objects.</li> <li>• If you discover a suspicious package or object, do not pick it up or move it.</li> </ul>
<b>Code Orange</b> Hazardous Material spill/event	<ul style="list-style-type: none"> <li>• Need to be aware if you are in the hospital.</li> <li>• Access Control may be implemented</li> </ul>	<ul style="list-style-type: none"> <li>• Do not go into affected area.</li> <li>• Victims need to be decontaminated before being touched/treated.</li> </ul>

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<b>Internal Events</b>	<b>How does it impact you?</b>	<b>Response</b>
<b>Code Green</b> Evacuation	<ul style="list-style-type: none"> <li>• May need to assist with evacuation.</li> <li>• May need to help monitor evacuated patients.</li> </ul>	<ul style="list-style-type: none"> <li>• Follow instructions of fire department and/or Incident Commander.</li> <li>• Assist evacuating patients as directed.</li> </ul>
<b>Utility Failure</b> Phones IT Water/Sewer	<ul style="list-style-type: none"> <li>• May need to use the Back up phone system.</li> <li>• Can't see medical records if IT down.</li> </ul>	<ul style="list-style-type: none"> <li>• May need to have the phone number of the units you call the most.</li> </ul>
<b>Code Triage, Internal</b>	Could be implemented with any of the above events.	

<b>Code Triage, External</b> Multi-casualty event	<ul style="list-style-type: none"> <li>• Help provide treatment of victims.</li> <li>• Aid in disposition of in-house patients.</li> </ul>	<ul style="list-style-type: none"> <li>• See additional hand out.</li> </ul>
<b>Epidemic/Bioterrorism</b>	<ul style="list-style-type: none"> <li>• Be aware of situation.</li> <li>• Increased patient volume.</li> </ul>	<ul style="list-style-type: none"> <li>• Notice unusual trends of patient symptoms.</li> <li>• Report to the Public Health Department.</li> <li>• Use Standard Precautions.</li> </ul>

<b>Any Event</b>	<b>How does it impact you?</b>	<b>Response</b>
<b>Access Control</b>	<ul style="list-style-type: none"> <li>• Need to be aware of implementation.</li> </ul>	<ul style="list-style-type: none"> <li>• Always wear hospital photo ID badge.</li> <li>• Expect delays.</li> <li>• Cooperate with door monitors.</li> </ul>

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**ED Physician overview of a response to a Mass Casualty Incident**

**Notification/Activation:**

Notification will occur by: 1) sudden influx of patients; 2) notification via EM System computer. When there appears to be an event that will overwhelm the capability of the ED a “Code Triage” will be announced. If there is an event that has a potential but has not occurred yet a “Code Triage-Alert” may be announced.

**Code Triage Plan:**

This is the plan that gears up the whole hospital and put a response into action. Hospital Emergency Incident Command System (HEICS) and the command center are activated.

**Triage and Treatment Areas:**

- In a large incident the ED would not be able to manage all the patients within their walls. Triage will be done in the ambulance bay.
- Immediate patients in the ED, at SMH overflow into the Cath Lab area.
- Delayed patients in the ASU at both facilities.
- Minor patients in the Shasta room at SMH, Rehab on the 3<sup>rd</sup> floor at SGH. For each of the treatment areas there is a nurse that will be in charge called the Unit Leader.

**Triage method:**

Depending on the resources available, triage may begin by using the START triage method. Victims are triaged into 4 categories:

- *Immediate* – Red, the most critical.
- *Delayed* – Yellow, moderate injuries.
- *Minor* – Green, minor injuries or no injury.
- *Expectant* – Black, dead or expected to die soon.

**ED Physician Role:**

ED MD's will be expected to staff the Triage and Immediate Treatment areas. Other physicians will need to staff the Delayed, Minor and Morgue (Expectant) areas. If the event begins after hours, an ED MD may have to also act as the Medical Staff Director to help coordinate physician response and provide medical direction to the Command Staff.

**Documentation:**

There is a special “disaster chart”. This is to meet The Joint Commission/CDPH requirements.

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### Physician Role During a Disaster

*This is an overview of what would be expected from the physicians during a disaster.  
All physicians should have photo hospital ID badges with them.*

Where to report: to the hospital where you are on call, or to the closest facility where you have privileges. Check in at Medical Staff Services then go to normal area (i.e. ED, Surgery, or as assigned). If you are unable to reach a facility where you have privileges, go to the closest hospital. You will need proof of licensure so they can do emergency credentialing.

Types of Events				Physician Roles
Radiation	Chemical	Biologic	Trauma	
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>Emergency Department Physicians (or those with military triage experience):</b> <u>Your role:</u> The chief ED MD will make assignments to the Triage Area and Immediate Treatment Area. If staffing allows, you may also cover the Delayed and Minor Treatment Areas.
Only if with trauma			<b>X</b>	<b>Surgeons:</b> <u>Your role:</u> Be available for emergency surgeries and support treatment areas if not needed for surgery. Trauma patients will be arriving at non-trauma facilities.
<b>X</b> And may see in office		<b>X</b> And may see in office	<b>X</b>	<b>Family Medicine / Internal Medicine:</b> <u>Your role:</u> If you have patients in the facility, they need to be promptly evaluated for potential discharge or transfer to a lower level of care. Otherwise you will be given an assignment of treating patients in the Delayed (moderate injury) or Minor (minor injury) Treatment Areas. You may also be assigned to treat patients in the Immediate (severe injury) Treatment Area.
Possibly	Possibly	<b>X</b>	<b>X</b>	<b>Specialty Practice:</b> <u>Your role:</u> To be available for your specialty needs. Otherwise you will be given an assignment of treating patients in the Delayed (moderate injury) or Minor (minor injury) Treatment Areas. You may also be assigned to treat patients in the Immediate (severe injury) Treatment Area.

**Your Emergency Management Coordinator is:**  
 Sutter Medical Center, Sacramento – Loni Howard, RN (916) 733-8579

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**Emergency Department Physicians (or those with military triage experience):**

Where to report: to the ED where you are on call, or to the closest facility where you have privileges. If you are unable to reach a facility where you have privileges, go to the closest hospital. You will need proof of licensure so they can do emergency credentialing.

Your role: The chief ED MD will make assignments to the Triage Area and Immediate Treatment Area. If staffing allows, you may also cover the Delayed and Minor Treatment Areas.

**Surgeons:**

Where to report: to the OR where you are on call, or to the closest facility where you have privileges. If you are unable to reach a facility where you have privileges, go to the closest hospital. You will need proof of licensure so they can do emergency credentialing.

Your role: Be available for emergency surgeries and support treatment areas if not needed for surgery. Trauma patients will be arriving at non-trauma facilities.

**Family Medicine / Internal Medicine:**

Where to report: where you are on call, or to the closest facility where you have privileges. At SGH and SMH report to the Medical Staff Lounge. The Medical Staff Director will make assignments. If you are unable to reach a facility where you have privileges, go to the closest hospital. You will need proof of licensure so they can do emergency credentialing.

Your role: If you have patients in the facility, they need to be promptly evaluated for potential discharge or transfer to a lower level of care. Otherwise you will be given an assignment of treating patients in the Delayed (moderate injury) or Minor (minor injury) Treatment Areas. You may also be assigned to treat patients in the Immediate (severe injury) Treatment Area.

**Specialty Practice:**

Where to report: where you are on call, or to the closest facility where you have privileges. At SGH and SMH report to the Medical Staff Lounge. The Medical Staff Director will make assignments. If you are unable to reach a facility where you have privileges, go to the closest hospital. You will need proof of licensure so they can do emergency credentialing.

Your role: To be available for your specialty needs. Otherwise you will be given an assignment of treating patients in the Delayed (moderate injury) or Minor (minor injury) Treatment Areas. You may also be assigned to treat patients in the Immediate (severe injury) Treatment Area.

Update: 8/25/08

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**Physician Role During a Disaster (Continued)**

**Types of Disasters (Emergency Events) that will require additional physicians:**

- Multi- Casualty Incidents (Code Triage, External)
  - Examples

Earthquakes	Bombings	Plane Crash
Multi car crashes	Terrorism	Haz Materials
  
- Internal Events (Code Triage, Internal)
  - Examples
  - Evacuation
  - Event inside the hospital such as earthquake, explosion, fire

**Types of Terrorist events:**

1. **Nuclear** - Not as worried about this one.
  
2. **Biological** - There is a threat here. But it is difficult to weaponize many of the agents. If an event did happen, we probably wouldn't know about it until people started getting sick.  
Doctors would play a big role in recognition. Are you seeing more than usual "flu" cases? Are there any unusual symptoms? Contact the Public Health Department with any suspicions. May be good to make contact with local ED to alert them.
  
3. **Chemical** - There is a threat here. This could even occur without terrorism. A Hazardous Materials incident could occur any time.  
The goal is to not contaminate the hospital, staff and other patients. People with chemical contaminants on them should not be allowed in the facility until they are washed off (decontaminated). No staff member or physician should put themselves in danger by coming into contact with a hazardous material.  
At SMCS we are in the process of expanding our training and equipment to deal with this better.
  
4. **Incendiary** – Bombs. Oklahoma City and New York City are examples of this. Need I say more?

If you have any questions about Sutter Medical Center, Sacramento's response to a Disaster or Terrorism event, feel free to contact the Emergency Preparedness

Coordinator:

Loni Howard, RN, MSN

Office: 733-8579

pager: 523-6835

email: HowardL@sutterhealth.org

Update: 8/25/08

## **The Importance of wearing your SMCS photo ID Badge**

- We should be able to identify all physicians/employees in the hospital.
- You should be able to see if someone else is an employee, and belongs where they are.
- In the case of disaster or terrorism access to the hospital may be restricted – you need to be able to show you are a physician to enter.
- If street access is restricted, police may be manning barricades – you need to be able to prove you are a physician to enter.
- So you need your badge on you, not in your desk or locker.

### **When should you wear your ID Badge**

- ✓ Any time you are coming onto hospital property.
- ✓ Not just once you are in the hospital.