



<b>SARASOTA COUNTY GOVERNMENT EMERGENCY SERVICES DIRECTIVE</b>		
<b>DATE</b> Revised January 2020	<b>VOLUME</b> #3 <b>EMS OPERATIONS</b>	<b>NUMBER</b> <b># 310</b>
<b>CATEGORY</b> <b>POLICY</b>		
<b>SUBJECT</b> <b>EMS MEDICAL ALARMS AND MASS CASUALTY INCIDENTS (MCI) &amp; RAMP TRIAGE</b>		

## **PURPOSE**

To systemically and efficiently triage, treat, and transport victims of EMS Alarms and Multiple Casualty Incidents (MCI's).

## **BACKGROUND**

Sarasota County Fire Department responds to multiple calls per year that exceed the capabilities of first arriving units. Typically, calls with less than 10 patients can be handled with normal resources. Therefore, SCFD shall refer to calls with 3 – 9 potential patients as an EMS Alarm Medical. Scenes with 10 or more potential patients will be considered Mass Casualty Incidents (MCI). Once on-scene, Command may modify this determination according to the situation and the need to increase or decrease resources.

## **DEFINITIONS**

**EMS Medical Alarm Incident** – Low system impact incident with conventional response characteristics that can be handled with readily available resources. Patients are assigned directly to EMS units and the incident should not require establishment of Treatment and Transportation areas. Resource Hospitals should be able to treat all illnesses/injuries without becoming overwhelmed.

**Mass Casualty Incident (MCI)** – Incidents that outnumber the available resources of the organization at the time of the incident. MCI calls require implementation of the EMS Branch (Triage, Treatment, Transport, Medical Operations) and are characterized as incidents with more than 10 patients.

**RAMP Triage** – Rapid Assessment of Mentation and Pulse is an assessment that asks patients to follow basic commands rather than requiring a GCS calculation. This method will be the approved Triage model for SCFD.

## **PROCEDURE**

### **Incident Determination and Response**

#### **1<sup>st</sup> Alarm Medical: (3-5 patients)**

- 4 additional rescues (5 total)
- 1 additional engine/truck (2 total)
- 1 EMS Operations Captain
- 1 Battalion Chief

#### **2<sup>nd</sup> Alarm Medical: (6-9 patients)**

- 3 additional rescues (8 total)
- 1 additional engine/truck (3 total)
- 1 additional EMS Operations Captain (2 total)
- 1 additional Battalion Chief (2 total)
- Dispatch will notify the 2 closest hospitals and closest Trauma Center (3 total)

#### **MCI Level 1: (10-20 Victims)**

- 2 additional rescues (10 total)
- 2 additional engine/truck (5 total)
- Command shall establish:
  - EMS Branch positions
  - Safety
  - Accountability
- Command shall consider
  - MCI Trailer response
  - Mobile 1 Command unit response
  - Bus response for Green level patients
  - Special Ops response
  - Requesting activation of the Emergency Operations Center
- Dispatch will notify the next 3 closest hospitals (6 total)

#### **MCI Level 2: (> 20 Victims)**

- 2 additional rescues (12 total)
- 1 additional engine/truck (6 total)
- Emergency Operations Center activation
- Mobile 1 Command unit
- Command shall consider:
  - Second MCI Trailer
  - Additional buses
  - Special Ops response

## **Response Request**

The first arriving unit shall establish Command and size-up the incident. If it is determined that additional units are needed the appropriate radio transmission shall be:

***“Dispatch, R-15 requesting an MCI Level 1” or “Dispatch, R-15 requesting a 1st Alarm Medical”***

This terminology shall be used when requesting any type of EMS Alarm or MCI. Dispatch shall immediately dispatch the appropriate response and have them report to the designated staging area unless directed otherwise by Command.

## **Response Procedure**

A. The first arriving unit will establish **COMMAND** and:

1. Perform an initial size-up and advise Dispatch of:
  - a) The presence/absence of hazardous conditions.
  - b) Estimated number of victims.
  - c) Estimated number of Trauma Alerts
  - d) The appropriate EMS Alarm or MCI Level
  - e) The need for any specialized equipment
2. Establish a fixed Command Post
3. Transfer all communications over to a TAC or CMD frequency
4. Identify a Staging Area
5. Assign a Staging Officer as needed
  - a) Inform Dispatch of staging location.
  - b) Dispatch shall transmit location of the staging area.
  - c) Responding units shall report to Staging unless directed otherwise by Command.

B. For MCIs, Command will designate group leaders and assign personnel to:

- Medical Ops
- Triage
- Treatment
- Transport
- Staging
- Safety

C. Additional groups may be required depending on the complexity of the incident. These groups may include but not limited to;

- Landing Zone
- Extrication
- Special Operations
- Rehabilitation

D. Command, Safety Officer, and the EMS Operations Captain shall conduct a Post Incident Analysis (PIA) after every EMS Alarm or MCI.

## **Incident Management Responsibilities**

### **Medical Operations Leader (Medical Ops)**

- Reports directly to Command.
- Uses the radio designation and dons the “Medical Ops” vest.
- Oversees and coordinates all on-scene medical activities.
- Triage, Treatment, and Transport Group Leaders will report to Medical Ops.
- Advises Command of the progress of medical operations.
- Coordinates the need for supplies, equipment, and personnel for patient care.

### **Triage Group Leader**

- Reports directly to Medical Ops.
- Uses the radio designation and dons the “Triage” vest.
- Ensures that each patient is triaged utilizing RAMP triage.
- Ensures that each patient is designated to a treatment category using either triage tag and/or triage color ribbons.
- Informs Medical Ops of the number of victims within each category.
- Coordinates with Treatment to ensure victims are moved to the treatment areas.
- Ensures that **all** victims and/or potential victims have been triaged, including the walking wounded (Green).

### **Treatment Group Leader**

- Reports directly to Medical Ops.
- Uses the radio designation and dons the “Treatment” vest.
- Controls and coordinates on-scene treatment activities.
- Determines with Medical Ops and Triage whether victims will be moved to established treatment areas or treated where they are found.
- As needed, establishes Red, Yellow, and Green treatment areas
- Ensures a treatment log is completed that includes all victims treated.
- Has a single Rescue assigned to treatment area for supplies?
- Assigns personnel to victim care.
- Coordinates and allocates equipment needed in the treatment areas.
- Ensures that all victims are RE-TAGGED through a focused assessment in the treatment areas.
- Ensures triage tags are accurately completed and/or updated.
- Coordinates with Transport the prioritization and destination of victim transports.

## Transport Group Leader

- Reports directly to Medical Ops.
- Uses the radio designation and dons the “Transport” vest
- Establishes a Staging Area and assigns a Staging Officer
- Determines victim transport destinations based on:
  - Hospital capacity
  - Specialized treatment needs (i.e. burns, trauma alerts)
- Ensure a transport log is completed that includes all victims and destinations
- Notifies Command of any needs for additional transport units
- Determines a circular route for transports to flow past treatment areas
- Coordinate the transport of all victims from the treatment areas by priority
- Assigns ground transported patients to hospitals on a rotating basis.
- Coordinates with Landing Zone (LZ) the patients to be transported by air.
- For each transport advises Dispatch of the following:
  - Unit number
  - Hospital destination
  - Number of patients and category of each on board

## Staging Officer

- Reports directly to Transport Officer.
- Uses the radio designation and dons the “Staging” vest.
- Physically stationed in the Staging Area
- Coordinates the movement of all transport units from Staging to Treatment areas.
- Ensures a “Unit Staging Log” is maintained noting unit arrivals and departures
- Ensures that all keys to units in Staging Area are kept with the vehicle.
- Maintains a reserve of two transport vehicles

## Safety Officer

- Reports directly to Command
- Uses radio designation and dons “Safety” vest
- Identifies and mitigates safety issues throughout incident
- Assists Command and EMS Operations Captain with PIA

Personnel will utilize the **RAMP Triage Model** to assess and improve appropriate access to resources, thereby leading to better patient outcomes. This system is pulled from current, scientific-based approach to simplify EMS triage since seconds can save lives.

## RAMP Triage

- Benefits:
  - Rapid Identification of most severely wounded
  - Easy to use and to teach
  - No reliance on numbers or critical thinking
  - Uses Scientific Evidence

# RAMP Triage Model

(Rapid Assessment of Mentation and Pulse)

