

ARCADIA FIRE DEPARTMENT STANDARD OPERATING GUIDELINE

MULTIPLE CASUALTY INCIDENTS

Number: 112

Revision Date: 12/31/2016 File Name: Multi Casualty

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Approved:

Michael E. Lang, Fire Chief

PURPOSE

To establish standard guidelines for multiple casualty incidents and to insure proper utilization of all personnel responding to a Multiple Casualty Incident (MCI).

POLICY

It shall be the policy of the fire department personnel that all personnel shall follow the guidelines as outlined in this document.

PROCEDURE

I. An MCI is defined as any potential for, or actual incident, where first-in responders are unable to give sufficient aid, due to a lack of manpower, equipment, and/or medical transportation.

The MCI procedure is to be used as a starting point and/or guideline to assure that each function is carried out in a systematic and organized manner to a successful completion.

The objective of this SOG is to designate individual responsibility and to eliminate any confusion or questions pertaining to responses involving multiple victims.

II. ICS Structure

The MCI is structured under the guidelines of the Incident Command System. The first in company officer will assume incident command until relived by the first arriving chief officer.

The size of the incident and number of patients will determine how the incident is organized. On incidents with fewer patients all functions could be organized under a Medical Group Supervisor. On incidents with multiple patients there may be a need for better span of control. In that instance a Triage Unit Leader, a Treatment Unit Leader, and a Transportation Unit Leader would be assigned.

III. Physical Layout

If a treatment area is established the amount of patients, location of the loading zone, and safety of the patients should be considered when choosing a location.

When a staging area is considered, its access to the loading zone and away from the incident should be considered.

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IV. Responsibilities

A. First in Engine/Truck Company

- 1. The first arriving company officer shall size up the incident and take command.
- 2. The IC will request appropriate resources, and a staging area for incoming equipment.
- 3. The IC will work with the personnel on scene to determine number and category of patients.
- 4. The crew of the first in company will begin triage of the patient after ensuring the scene is safe.

B. First in Rescue Ambulance

1. Patient Person

- a. The patient person of the first in RA will be the initial Treatment Unit Leader unless otherwise assigned by the incident commander.
- b. The priority as to what victims are transported to the hospital first shall lie upon the first-in paramedics.
- c. As the incident grows the first-in paramedics will be assigned to a specific unit, group or division.

2. Radio/Report Person

- a. The radio person on the first in RA shall establish Medical Communications (MED COMM)
- 3. The priority as to what victims are transported to the hospital first shall lie upon the first-in paramedics.
- 4. When possible the first arriving rescue ambulance will remain on scene until the completion of the incident.

C. Medical Communications (MED COMM)

- 1. The base station will be contacted when there is up to five patients. On an incident with greater that five patients the radio person will contact the medical alert center utilizing either mobile phone or radio.
- 2. When contacting the medical alert center, the radio person will utilize the Los Angeles County Department of Health Services (LA Co DHS) chart for the hospital zone. The radio person will follow LA Co DHS policies 519 through 519.6d.

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3. The information needed by MED COMM prior to making contact with the base station or medical alert center includes:

- a. Number of Patients
- b. Age of Patients (adult vs pediatric)
- c. Type of Injury (trauma or medical)

D. Incident Priorities

- 1. Incident Commander
- 2. Triage Unit Leader
- 3. Treatment Unit Leader
- 4. Transportation Unit Leader
- E. Golden Triangle of Patient Transportation
- F. As a MCI grows in size and complexity, one of the key components in efficiently transporting patients is establishing the Golden Triangle of Patient Transportation. The three parts of the triangle are:
 - 1. Transportation Unit Leader
 - 2. Treatment Unit Leader
 - 3. Medical Communications Coordinator

Transportation Unit Leader initiates the moving of the patients and determines destination.

V. Documentation

While on scene, a triage tag shall be completed for all patients.

Patient name, chief complaint, destination and time left the incident shall be documented on a separate form. This will be used for incident documentation and to assist with family re unification.

A patient care report shall be completed by the agency that transports the patient.

VI. References

California Field Operations Guide 420-1 Chapter 15 Multi Casualty Incidents Los Angeles County Department of Health Services Management of Multi Casualty Incidents Reference 519