

Methods: An aircraft crash in proximity to the AIA was simulated in order to assess the required procedures and cooperation and coordination of all agencies involved. The Airport Medical Services assessed the emergency response plan, coordination with involved agencies, transition of command, medical response operations (triage, treatment, and transport), response performance, communications, data recording, role assignment, psychosocial support, equipment efficacy, etc. Evaluation forms of all previous exercises were reviewed and gaps and pitfalls were taken into consideration.

Results: Following the observations from previous exercises, improvements were seen in all aspects listed. Issues that can be improved further concerned communications, data recording, and equipment. These have been marked and will be addressed. Better cooperation with other involved agencies and better coordination of all medical personnel was achieved because of enhanced knowledge of the emergency plan, common training, and specific role assignment.

Conclusions: Emergency field exercises organized by the AIA and reviewed led to the identification and improvement of weaknesses and limitations of planning, maximizing performance, and improving the efficiency of the services provided.

Keywords: airplane crash; emergency response plan; field exercise; medical response; preparedness
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(H75) Hospital Preparedness for Non-Conventional Event—Drill Evaluation

Odeda Benin-Goren; Ofer Lehavi; Tina Shamis; Ayala Lior; Pinchas Halpern; Ronen Libster
Tel Aviv Medical Center, Tel Aviv, Israel

Introduction: The Tel Aviv Sourasky Medical Center's (TASMC) contingency plan for non-conventional war includes the training of personnel for immediate response. The hospital departments practice as mass-casualty incident (MCI) sites. The hospital's surge capacity is expanded with designated sites designed to handle hundreds of patients, activation of the hospital's call-up system, a computerized information center for the public, and the activation of the Incident Command System (ICS). All these goals were practiced during a non-conventional war drill in March 2008.

The drill involved the Home Front Command (HFC), the Magen David Adom (the National Israeli ambulance services, emergency medical services), the Israeli Police Forces, the Tel Aviv Municipality, and the Tel Aviv Firefighters.

Methods: Approximately 600 nurses, physicians, and paramedical personnel participated in the drill. There were four designated sites for MCI patients. All computer and communication systems were operational during the drill.

Results and Conclusions: Drills are a necessary tool to assess preparation and readiness. Drills provide the lessons and recommendations to be implemented at the next event.

Keywords: chemical, biological, radiological, nuclear, or explosive; drills; hospitals; non-conventional event; preparedness
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(H76) Mapping Support for a Health Emergency System

Karel Antos; Bruno Jezek; Jan Vanek; Miroslav Prochazka
Faculty of Military Health Sciences, Hradec Kralove, Czech Republic

Supporting populations during major incidents is based on the effective coordination of available medical resources. One way to ensure better preparation for emergency situations is to utilize geographic information system modeling methods to fuse infrastructure, demographic, and risk sources data. Synthesized maps, developed in close collaboration with the regional administration and emergency system, provide visualization of regional medical capabilities to cope with a major incident with a large number of casualties.

Mapping support for health emergency system employs a two-step approach. First, it uses GIS technology to process communication network data to determine distances between major incident sites and medical facilities. These distances, estimated types and number of casualties, and available medical resources are used to calculate the time needed to cope with a major incident in a specified point in the territory. The procedure is repeated for all the defined points in the area of interest. The result is a capability map—a map layer covering the territory and containing color-coded information on the capability of the territory to absorb the estimated number of casualties in a given time period.

In the second step, the capability map is fused with a risk profile and demographic data of the territory to identify which gaps are necessary to address (e.g., by improving management of resources or creating new resources within the territory).

The synthesized maps form a basis for policy analysis and scenario planning in major incident preparedness. Mapping support brings advantages to situational awareness for decision-makers. Local stakeholders can use these maps to enhance major incident planning, policy change support, and citizen education.

Keywords: capacity building; emergency; global information system; mapping; preparedness
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(H77) Disaster Preparedness by Residents in an Earthquake- and Tsunami-Prone Area

Taichi Takeda; Tsuyoshi Hatada; Ken Ishikura; Yukinari Omori
Mie University Hospital, Tsu-city, Japan

Background: There is a 60% chance that major earthquakes with a magnitude of 7–8 will occur in the next 30 years on the southern coast of Mie, Japan. Since the southern rural part of the region is likely to be isolated by tsunami and landslides, residents are expected to take a self-reliant approach immediately after the earthquake.

Objective: The objective of this study was to develop a disaster medical support system in the region to encourage medical disaster preparedness.

Methods: Basic and advanced life support educational programs have been promoted. Lectures and workshops have been provided for public, local medical associations and the main hospital. For the local hospital, the Hospital Major