



Maryland Triage System Incident Command





Revised Jan 2019

Establishing the Multi-Casualty Incident Command System



The program highlights appropriate components of the National Incident Management System (NIMS) related to Emergency Medical Services



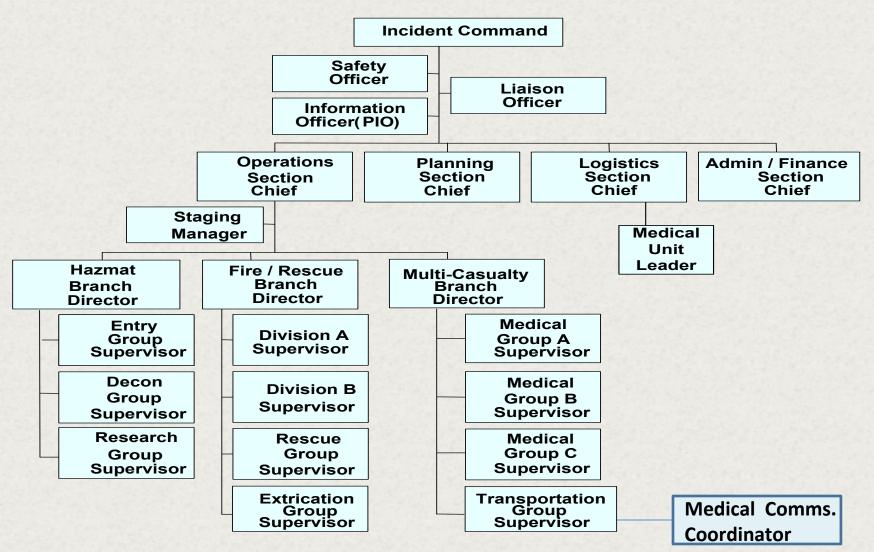
Enabling Objectives

Upon completion of this training the participant will be able to:

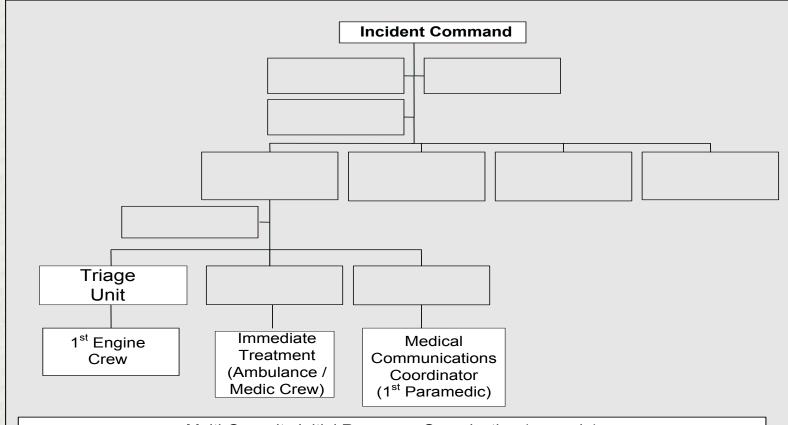
- Identify the positions and the organizational structure of the Incident Command System (ICS) as it applies to a Multi-Casualty Incident
- Explain the responsibilities of the first unit arriving on scene
- Explain patient flow through the ICS Multi-Casualty structure

National Incident Management System (NIMS)

Expanded Organizational Structure



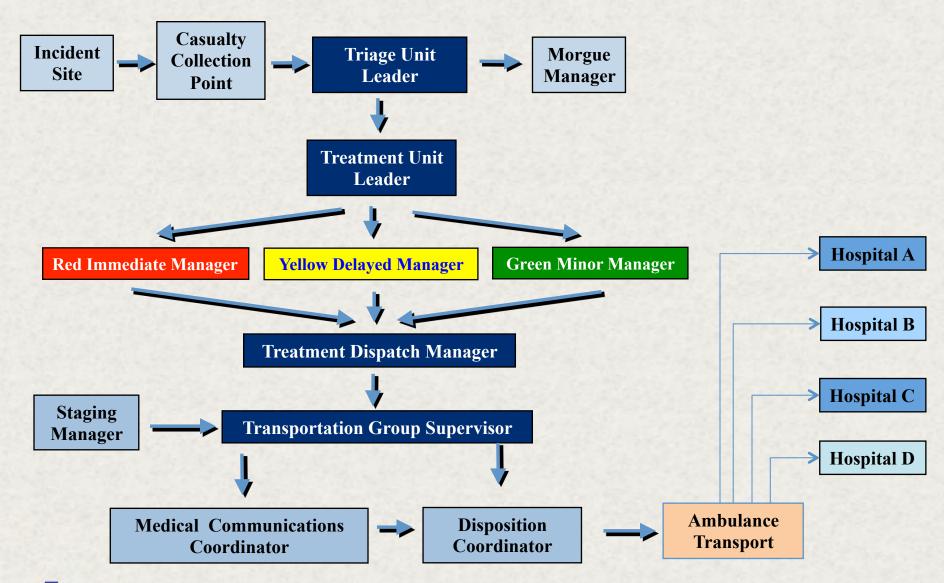
Initial EMS Response



Multi-Casualty Initial Response Organization (example)

The Company Officer establishes or assumes command and the engine personnel begin Triage utilizing Simple Triage and Rapid Treatment (START) or (Jump-START) process by triaging victims and at the same time, assess any additional hazards (fuel spills, unstable vehicles, etc.). A Paramedic from the ambulance / medic unit becomes Medical Communications Coordinator (Med. Comm.) while the second member (PM or EMT) begins establishing Treatment Areas with the Immediate Area first.

Patient Flow



First Unit/Incident Command

- Assess and Secure the Scene
- Ensure safety
- Establish or assume command
- Direct incoming units
- Request additional resources (Order Early and Order Big)
- Establish *Triage Unit Leader*



First Unit/Incident Command

- Establish <u>Medical Communications Coordinator</u>
- Notify hospitals (EMRC)
- Establish initial Treatment Area
- Establish <u>Transportation Group</u> (when personnel available)



- Maintain the 5 S's of the Multi-Casualty Incident:
 - Safety, Size-up, Send, Set Up, and START/JumpSTART Triage

Triage Unit Leader



- Coordinate with Treatment Unit Leader to determine if triage will be conducted in:
 - Incident/extrication area
 - Designated <u>Casualty Collection Point</u> (CCP)
 - Treatment area
- Approximate number and severity of victims
- Report this information to command
- Supervise:
 - Triage Teams
 - <u>Porter Teams</u> (Litter Bearers)
 - Additional resources

Triage Unit Leader



- Ensure safety of all personnel
- Ensure triage of patients is based on <u>START</u> or <u>JumpSTART</u> Algorithm
 - Primary *Triage* (ribbons only)
- Communicate resource requirements to IC or <u>Medical Group Supervisor</u>
- Provide frequent progress reports
- Establish *Morgue* if necessary

- Identify and establish <u>Treatment Areas</u>
 - Consider weather, size, accessibility, safety, and hazmat potential
- Assign <u>Treatment Area Managers</u>
- Notify IC of <u>Treatment Area</u> locations and give status report

Establish communications with <u>Triage Unit</u>
 <u>Leader</u>

 Ensure each patient is issued a <u>MIEMSS Triage</u>
 <u>Tag</u> and does <u>NOT</u> leave area without one attached

 Utilize <u>Patient Tracking Forms</u> and/or <u>Treatment Area Manager logs</u> to track patients for each area

- Request sufficient medical caches and supplies as necessary
- Provide access for <u>Medical Care Support Units (MCSU)</u>
- Establish communications with patient <u>Transportation</u>
 <u>Group Supervisor</u>
 - Consider delegating this task to Treatment Dispatch Manager
- Maintain accountability/safety for all patients and personnel
- Assess mental and physical well being of personnel

Treatment Area Managers

Red Immediate Manager

Yellow Delayed Manager

Green Minor Manager

- Define <u>Entry</u> and <u>Exit</u> points
- Clearly identify each area and delineate each area's boundaries.
- Morgue needs to be distant from treatment areas
- Prepare equipment and supplies
- Brief <u>Treatment Crew(s)</u>
- Ensure <u>Secondary Triage</u> is completed
- Ensure each patient has been issued a <u>Triage Tag</u>
- Prepare and maintain a <u>Treatment Log Sheet</u>

Treatment Dispatch Manager

- Receive information from <u>Treatment Area Managers</u>
- Establish and maintain communications with <u>Medical Communications Coordinator</u>
- Coordinate with <u>Treatment Managers</u> and <u>Medical Communications Coordinator</u> to transport patients to appropriate medical facilities
- Utilize <u>Triage tags</u> for patient movement and/or mark the hospital destination on <u>Transport Record</u> of the <u>Disaster Triage</u> <u>Tag</u>
- This position is often combined with another position

Transportation Group Supervisor

- <u>Establish One Way Traffic Flow</u>: There should always be a clear, unobstructed flow of transport units in and out of the transport area. Transport units should pull up, load, leave, but NOT execute a back-up of the vehicle
- Prepare and maintain a <u>Log Sheet</u>
- Establish exit point
- Assign Communications (SYSCOM/EMRC) and Air/Ambulance Disposition Coordinators

Medical Communication Coordinator

- Contact EMRC/Communications Center
 - Advise type of incident
 - Provide location
 - Describe incident
 - Provide approximate patient count (by priority if possible)
 - Request call down of hospitals
- Establish <u>Communications Log</u>



Medical Communication Coordinator

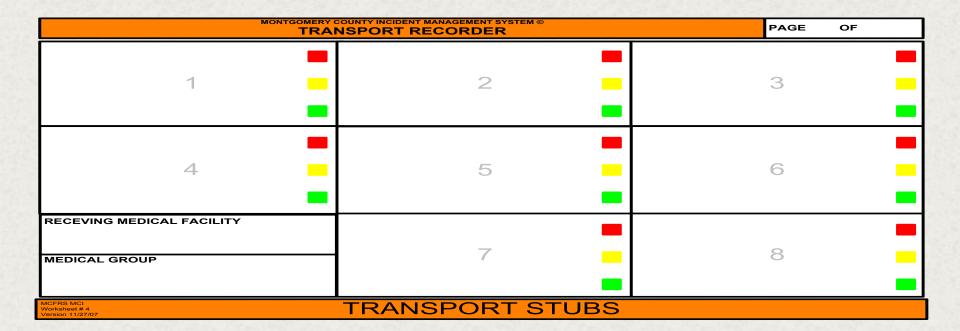
Receive bed availability from <u>Communications</u>
 <u>Center</u>

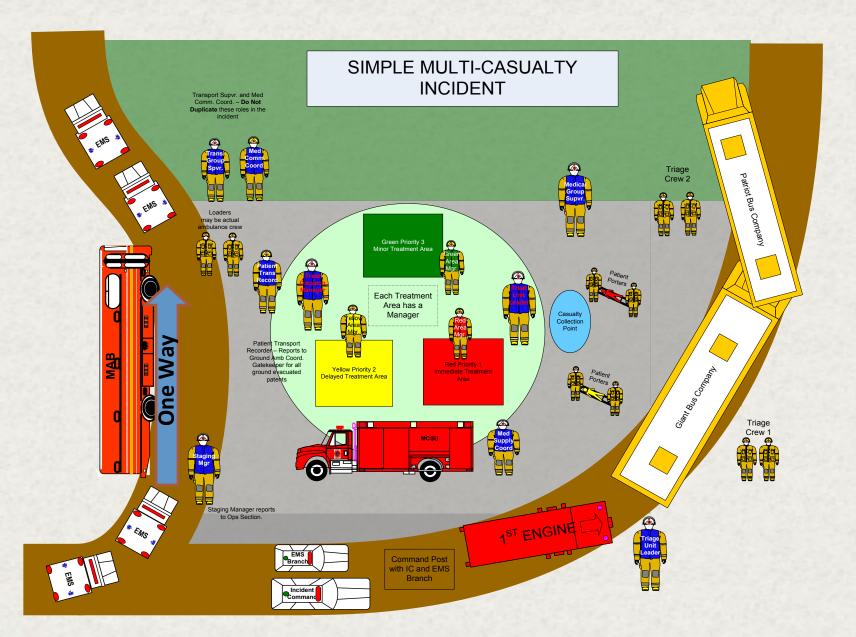
- Communicate availability to
 <u>Ambulance Disposition Coordinator</u>
- Update hospitals on incident status every 30 minutes
- Advise hospital(s) when incident is terminated



Air/Ground Ambulance Disposition Coordinator

- Receive bed availability from <u>Medical Communication Coordinator</u> (EMRC)
- Prepare log sheet for each hospital and their "tickets"
- Update information on Patient Tracking forms





Tracking Patient Flow



- Attach triage tag to ribbon
 - Each patient <u>must</u> receive a triage tag
- Circle priority at initial assessment

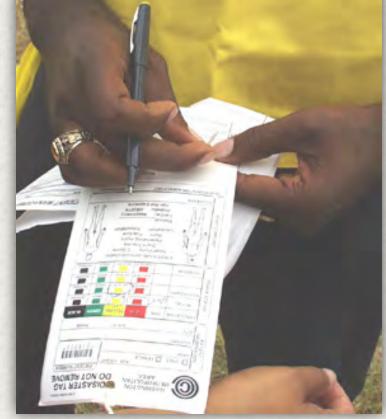




- Remove treatment peel-off label and place on treatment log
 - Note time on tag









Red Immediate Patients

Yellow Delayed Patients

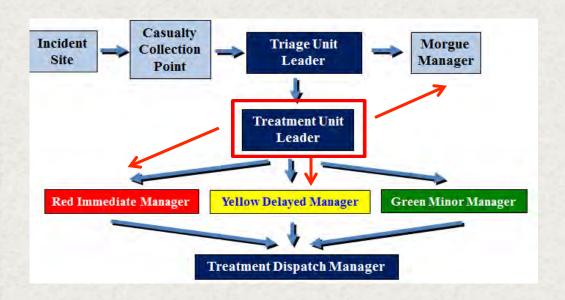
Green Minor Patients

Expectant

Morgue



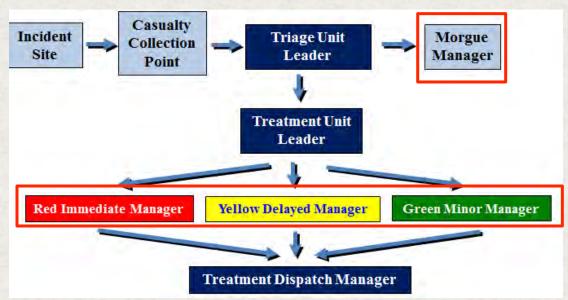
Direct crew to appropriate patient area



Treatment Area Managers

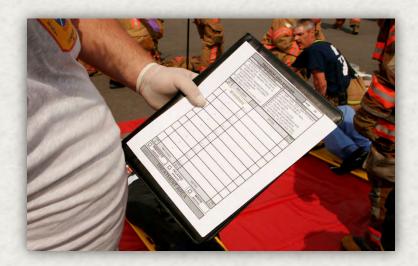
- Log patient into area
- Take "other" barcode label and place on log





Treatment Area Managers

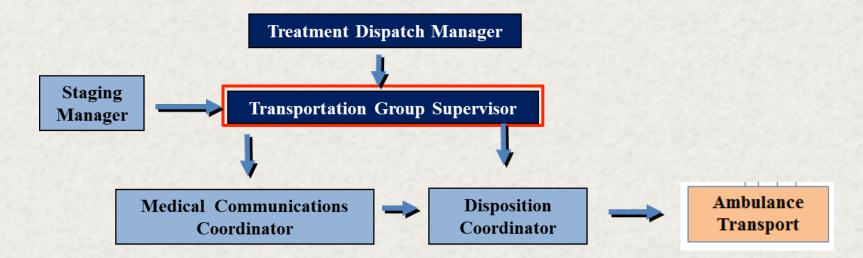
- Assign crew to care for patient
 - Reassess ABC's
 - Stabilize life threatening conditions (airway, needle decompression, tourniquet, antidote)
 - Immobilize
 - Treat major fractures
 - Package patient for transport to appropriate facility
 - Utilize triage tag to note assessment and treatment interventions and/or on triage tag
- Ensure patient can be transported safely







Transportation Group Supervisor

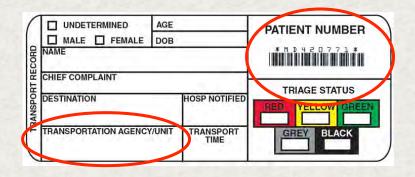


- Coordinate loading of patients
- Assign
 - Medical Communication Coordinator
 - Air/Ambulance Disposition Coordinator

Transportation Group Supervisor Patient Loading

- Contact Staging for transport units
- Contact Treatment Dispatch Manager /Treatment Areas for patients ready to load
- Scan triage tag and insert Unit Number and Priority
- Write information on tear-off transportation record section (commonly called "<u>Ticket</u>") part of triage tag
- Peel off a barcode label and place on log sheet







Patient Loading

- Load patient into transport unit
- Tear off <u>Transportation</u> <u>Record</u> ("Ticket") and hand to driver



	UNDETERMINED	AGE		PATIENT NUMBER
e e	MALE FEMALE	DOB		A desired and about suppliers and
RECORD	CHIEF COMPLAINT			* M D 4 2 0 7 7 3 *
97.57	DESTINATION		LUCCO NOTIFIED	TRIAGE STATUS
RANSPORT	DESTINATION		HOSP NOTIFIED	RED YELLOW GREEN
T	TRANSPORTATION AGENCY/UNIT		TRANSPORT TIME	GREY BLACK

Patient Loading

 Remind provider to update or complete *Transport Line* on the Tag once hospital is assigned

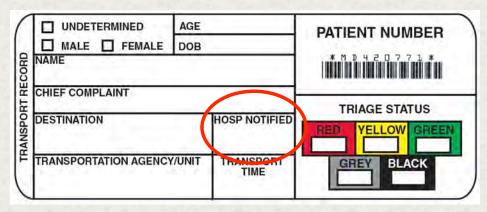


 On hospital arrival, place Barcode Labels on official printout copies of the Electronic Patient Care Report (ePCR) or electronic Maryland EMS Data System (eMEDS) and hospital chart



Medical Communication Coordinator

- Receive ticket from <u>Ambulance Disposition Coordinator</u>
- Communicate information to hospital
 - Unit, jurisdiction, and number
 - Number of patients with priority of each
- Initial ticket in the "Notified" field



Patient Loading

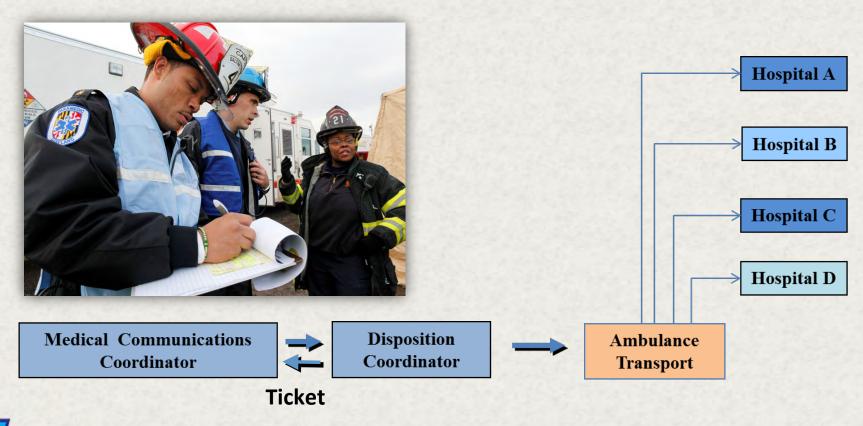
- Direct Transport Unit to Ambulance Disposition Coordinator
- Maintain <u>One Way</u> traffic flow
- Do NOT have unit back up or back in



- Receive Transport Record
 (commonly called "Tickets") from driver
- Transport "Tickets" go from the driver to the Disposition Coordinator

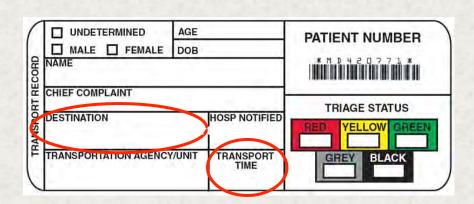
UNDETERMINED	AGE		PATIENT NUMBER
MALE FEM.	ALE DOB		
NAME			
CHIEF COMPLAINT			
DESTINATION		HOSP NOTIFIED	TRIAGE STATUS RED YELLOW GREEN
DESTINATION			HEB VELLOW GREEN
TRANSPORTATION AGENCY/UNIT		TRANSPORT TIME	GREY BLACK

Discusses the destination hospital (appropriate for patient condition) with the <u>Medical Communication Coordinator</u>



- Give driver destination and confirm directions
- Write destination and transport time on ticket
- Give ticket to

Medical Communication Coordinator





- Receives "ticket" back from <u>Medical Communications</u> <u>Coordinator</u>
- Tracks available beds at hospitals
- Places "ticket" label on <u>hospital destination logs</u> and notes time



The Process in Review

- Incident Occurs
- Walking wounded sent to Casualty Collection Point
- Triage of Patients
 - Patient receives a ribbon by Triage Unit Leader or designee
 - Only attempt to life-saving interventions (Airway, Needle decompression, Tourniquet, Antidote)
- Patient is moved to various treatment areas at direction of *Treatment Unit Leader* and receives triage tag and treatment

The Process in Review

- Treatment Dispatch Manager coordinates with Transportation Group Supervisor/Patient Transport Recorder
 - Arranges for patient to be moved to transport vehicle
 - Triage tag to remain with patient at all times
- EMS Staging Manager dispatches ambulance to designated pick-up area
- Driver is given Transport Record "Ticket" piece of triage tag
- Proceeds to Ambulance Disposition Coordinator

The Process in Review

- Driver gives "Ticket" to Ambulance Disposition Coordinator
 - Coordinates with Medical Communication
 Coordinator for hospital availability and dispatch
- Driver is given hospital transport information prior to leaving scene
- Patient is transported to designated hospital
- Arrival time should be placed on triage tag

Maryland Triage System



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