

KINGS COUNTY HOSPITAL CENTER

PERIOPERATIVE SERVICES

POLICY: **Division Disaster Plan**

DATE: January 3, 2002

REVISED: July 2, 2002; March 31, 2003

PURPOSE: To set forth the protocol to respond to disaster situations where Perioperative Services clinical and support staff will be required.

When a hospital-wide disaster is signaled (4 sets of 2 bells, 2-2-2-2 and a "yellow alert" called overhead), and/or the Kings County Hospital Center senior administrator or his/her designee activates a hospital disaster alert, the Perioperative Services disaster plan will be activated. **All Perioperative Services, including the Operating Room, PACU, Anesthesiology, Ambulatory Surgery Unit (ASU), Gastroenterology (GI), Cystoscopy, and Bronchoscopy will be immediately mobilized using the MCI protocol.** The Medical Director/Administrator of Perioperative Services, the Director of Anesthesiology, the Director of Ambulatory Surgery, the Senior Associate Director of Perioperative Services/Administrator, the Associate Director/ Administrator for Anesthesiology/Ambulatory Surgery/Pain Management and the Associate Director of Perioperative Nursing Services, or their designees, will report to the **Command Center** (Medical Board Room, B-1157) for instructions.

The following division-specific disaster response will be implemented:

O.R./PACU:

All elective surgery currently in progress will continue until completed. All other elective procedures will be held until instructions to cancel the elective schedule are received from the Command Center (B-1157). **Note: The elective surgery schedule is from 7:45 a.m. to 4:00 p.m., Monday through Friday.**

Nursing and support staff will activate the Trauma O.R., and as many O.R. suites as are available for disaster patients who will require surgical intervention.

Nursing and support staff will be on standby, and extra O.R./PACU staff will be contacted and called in as required, by a member of O.R. administration, or a designee.

All patients in the PACU will be reassessed for possible discharge.

Telephone numbers and pager numbers for all Administrative, Nursing, and Support Services staff are available in the BOR/PACU nursing stations.

If a disaster alert is called during off hours (i.e., tours 1 and 3 or weekends and holidays), the Head Nurse and/or charge nurse for the O.R. and PACU will activate the Trauma O.R., and as many O.R. suites as staffing allows. The nurse-in-charge will remain in contact with the Administrator on Duty (AOD) and/or the **Command Center** for further instructions.

The O.R. Head Nurse and/or charge nurse will contact the Senior Associate Director/Administrator and Associate Director for Perioperative Nursing, to inform them of the disaster alert. The Head Nurse (or charge nurse) will then be responsible for calling nursing and support staff into work.

Ambulatory Surgery Unit:

The ASU and/or PreSurgical Testing area will function as a PACU extension and/or stage 2 recovery area during disaster alerts.

The ASU and/or PreSurgical Testing area may function as a holding and/or triage area for stable patients awaiting the O.R., if necessary.

Patients in the PreSurgical Testing area for preoperative testing at the time of the disaster alert will be given an appointment to return on another date and sent home.

Patients awaiting ambulatory procedures will be kept NPO until the decision is made that the elective O.R. schedule is cancelled. When the elective schedule is cancelled, all preoperative patients will be sent home with instructions on how to obtain a new operative appointment.

ASU nursing and support staff members will be mobilized on off-hours for a disaster alert. The telephone numbers of all ASU staff are available in the "B" O.R. anesthesia office, in the black binder containing the telephone numbers of anesthesiology personnel.

ASU staff may be re-deployed to the PACU or other essential areas, if necessary.

ASU staff will maintain a list of the names and telephone numbers of all patients cancelled, including patients for preoperative testing.

Anesthesiology:

During normal working hours of 8:00 a.m. to 4:00 p.m., an Attending Anesthesiologist, a CRNA,

and the resident and student nurse anesthetist assigned to the PACU will proceed to the Emergency Department for the purpose of assisting in resuscitation and triage.

On off-hours, the Attending Anesthesiologist assigned to Obstetrics and a senior resident will report to the Emergency Department for the purpose of assisting in resuscitation and triage. If the Labor and Delivery census does not permit the Obstetrical Attending Anesthesiologist to leave the area, another staff Attending will be assigned to report to the Emergency Department. If necessary, the Obstetrical Attending Anesthesiologist can be relieved by the first Attending Anesthesiologist to report to the O.R.

Anesthesiology personnel will be responsible for setting up each available O.R. with appropriate equipment for trauma.

Resident staff assigned to Obstetrics will be diverted to the "B" O.R. if the obstetrical census is low.

During off-hours, the Attending Anesthesiologist on-call will be responsible for notifying the Medical Director of Perioperative Services, the Directors of Anesthesiology and Ambulatory Surgery, and the Associate Director of Anesthesiology/Ambulatory Surgery of the disaster alert.

During off hours, the Attending Anesthesiologist on-call will be responsible for directing the activities of the Department until relieved by either the Medical Director of Perioperative Services, the Director, the Director of Ambulatory Surgery, or an appropriate designee.

The Attending Anesthesiologist in-charge, or his/her designee, shall contact appropriate members of the clinical staff in the event of activation of the disaster alert, using the MCI protocol. He/she will be responsible for providing an adequate number of Attendings, CRNAs, residents, and when possible, student registered nurse anesthetists (SRNAs), to meet anticipated needs during the disaster alert.

The telephone numbers and pager numbers of all departmental personnel are available in the "B" O.R. anesthesia office, in a black binder marked "Telephone Numbers." Pager numbers of administrative personnel are noted on the chalk board in the anesthesia office.

During off-hours, members of the anesthesia call team will set up each available O.R. with appropriate equipment for trauma.

Gastroenterology/Cystoscopy/Bronchoscopy:

All elective invasive procedures currently in progress will continue until completed. All other elective procedures will be held until instructions

to cancel the elective schedule are received from the Command Center (B-1157). The elective invasive procedure schedule is from 8:00 a.m. to 4 p.m., Monday through Friday.

Staff may be re-deployed to the PACU or other essential areas, if necessary.

Staff will maintain a list of the names and telephone numbers of all patients cancelled.

Nursing and support staff will activate all available procedure rooms for use in a disaster alert. These rooms may be used to perform minor surgical procedures, or as additional triage and/or holding areas.

All patients in the GI Recovery area will be immediately assessed for possible discharge. This recovery area will function as an extension of the PACU, as needed.

Telephone numbers and pager numbers for all Nursing and support services personnel are available in the "B" O.R. nursing station.

Nursing and support staff will be on standby, and extra staff will be contacted and called in, as required, by a member of Periop administration, or a designee.

The KCHC Disaster Plan, located in the "B" O.R., is to be referred to for further information regarding institutional policy.

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Medical Director/Administrator
Perioperative Services

DAVID HUNTER
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Director
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ELAYNE MC KENNA, CRNA, M.A.
Associate Director/Administrator
Anesthesiology/Ambulatory Surgery/
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MARGARET JONES, R.N.
Associate Director for Nursing
Perioperative Services

Reviewed: 7/03

ATTENTION!

ALL ANESTHESIOLOGY PERSONNEL

THE NEW DISASTER ALERT BELL

SEQUENCE IS AS FOLLOWS:

Effective immediately, in the event of disaster, bell sequence

2-2-2-2 (four 2s)

will be rung indicating the emergency.

The old bell code (2-2-2-2-2 - five 2s) will no longer be used.

The bell code will be followed up with an overhead page indicating a *yellow* alert.

Thank you.

ANESTHESIOLOGY ATTENDING-IN-CHARGE

Responsibilities:
Confirmed:

Done:

Time:

Contact Director of Service

Contact Associate Director

Prepare Operating Rooms for
trauma

Discharge PACU patients who
are stable

Send team to the E.D.
(OBS anesthesia Attending,
Team captain)

Report to Command Post

Organize overall disaster response
until relieved by Director

DIRECTOR OF SERVICE

Responsibilities:
Confirmed:

Done: **Time:**

Contact Chief of Service

Contact Director of Ambulatory
Surgery

Notify Attending anesthesiologists
on call-down list

Coordinate clinical activities
upon arrival

Report to Command Center at
intervals

Head count of available staff upon
arrival

Liaison with Anesthesiology at
SUH

DIRECTOR OF AMBULATORY SURGERY

Responsibilities:
Confirmed:

Done: **Time:**

Notify remaining Attending
anesthesiologists on
call-down list

Notify resident staff on call-down
list

Assist in the coordination of
disaster response

Relieve OBS anesthesia attending
in E.D.

Report to Command Center at
intervals

Coordinate medical activities of
the PACU and ASU

ASSOCIATE DIRECTOR

Responsibilities:
Confirmed:

Done: **Time:**

Contact CRNA staff on
call-down list

Contact ASU Head Nurse

Contact Anesthesiology
secretarial staff on
call-down list

Open the Ambulatory Surgery
Unit for use as holding/
recovery area

Report to Command Center at
intervals

Assign a senior CRNA to E.D.
team

Assign a senior R.N. to manage
ASU area

Liaison with O.R. nursing

Direct clerical staff in support
activities

Call Pharmacy for additional
drugs

HEAD NURSE, ASU

Responsibilities:
Confirmed:

Done: **Time:**

Contact Nursing staff on
call-down list

Contact physician assistant

Contact clerical staff on
call-down list

Contact support staff on
call-down list

Prepare emergency equipment

Call Linen service for
additional supplies

Make stretchers and wheel-
chairs available for
transport

Assign PCAs and Nurse Aides
for transport

Coordinate the preparation of
ASU for holding/recovery
functions

Liaison with PACU

ANESTHESIOLOGY SECRETARIAL STAFF

Responsibilities:
Confirmed:

Done:

Time:

Manage telephones in
anesthesia office

Contact additional staff
as needed

Perform errands as needed

Replenish stationery supplies
as needed

CHIEF OF SERVICE
ADMINISTRATOR, PERIOPERATIVE SERVICES

Responsibilities:
Confirmed:

Done: **Time:**

Report to Command Center
upon arrival

Contact Directors of Service and
Ambulatory Surgery, if
necessary

Coordinate clinical activities in
the absence of the
Director of Service

Coordinate notification of
Attending anesthesiologists
on call-down list, as
necessary

Liaison with Command Center
upon arrival

Liaison with Anesthesiology at
SUH upon arrival

NEW YORK CITY HEALTH AND HOSPITAL CORPORATION
KINGS COUNTY HOSPITAL CENTER

DEPARTMENT OF ANESTHESIOLOGY

I have been oriented to my role in the Kings County Hospital Center's disaster plan, and the disaster plan for the Division of Perioperative Services. I know the location of the disaster plan and call down protocol which will be implemented should a disaster occur. These documents are located in a gray binder entitled "Perioperative Services Disaster Plan" in the "B" O.R. Anesthesia Office.

Signature of Employee

Date

Printed Name of Employee
4/03

NEW YORK CITY HEALTH AND HOSPITAL CORPORATION
KINGS COUNTY HOSPITAL CENTER

DIVISION OF PAIN MANAGEMENT

I have been oriented to my role in the Kings County Hospital Center's disaster plan, and the disaster plan for the Division of Perioperative Services. I know the location of the disaster plan and call down protocol which will be implemented should a disaster occur. These documents are located in a gray binder entitled "Perioperative Services Disaster Plan" in the "B" O.R. Anesthesia Office.

Signature of Employee

Date

Printed Name of Employee

NEW YORK CITY HEALTH AND HOSPITAL CORPORATION
KINGS COUNTY HOSPITAL CENTER

DIVISION OF AMBULATORY SURGERY

I have been oriented to my role in the Kings County Hospital Center's disaster plan, and the disaster plan for the Division of Perioperative Services. I know the location of the disaster plan and call down protocol which will be implemented should a disaster occur. These documents are located in the ASU policy and procedure manual kept in the unit. A copy is also filed in a gray binder entitled "Perioperative Services Disaster Plan" in the "B" O.R. Anesthesia Office.

Signature of Employee

Date

Printed Name of Employee