

I. PURPOSE

The intent of this policy is to ensure that the Clinical and Anatomic Pathology Laboratory Staff is familiar with the Departmental Emergency Management Plan (EMP), internal and external.

II. POLICY

In the event of a snow emergency, transit strike or other crises, all employees are required to arrive on schedule for their assigned shift. Travel arrangements are the responsibility of the individual employee. All the employees will remain on duty, until released by incoming staff.

In addition, the following arrangements will be made appropriate:

- A.** Supervisors subject to approval may be authorized to stagger work schedules.
- B.** Voluntary car pools will be established and posted.
- C.** Recall of staff that live within walking distance of the University Hospital.
- D.** Institutional provision of emergency sleeping accommodations for staff required to stay overnight or longer.
- E.** Institutional provision of additional parking and/or extended hours of parking.
- F.** Emergency information area will be established.

III. DEFINITION(S)

None

IV. RESPONSIBLE

Clinical and Anatomic Pathology Laboratory Staff

V. PROCEDURES/GUIDELINES:

a. Identification and Communication of a Potential Disaster

i. What to do if you learn of a potential Disaster

Any employee who learns of an occurrence that might constitute a disaster should attempt to obtain the following information:

1. The nature of the occurrence
2. Estimated number of casualties
3. Types of injuries
4. Expected number and estimated time of arrival of victims

ii. Who to notify of a potential Disaster

1. The same action shall be taken for all potential disasters.
2. The employee who learns of the occurrence must notify the Laboratory Administrator and or Senior Administrator during the day at ext. 2403 or 1515, on off-tours will notify the Administrator on Duty (AOD) at 4683 and Hospital Police at ext. 2626. The AOD can also be reached by pager through the page operator.
3. The final decision to open the Emergency Operations Center (EOC) rests with Senior Administration.

b. Initiation of the Emergency Management Plan:

The Emergency Operations Plan (EOP) may be initiated in three distinct phases, **Alert, Partial Activation** and **Complete Activation**.

Alert:

The Alert Phase of the **EMP** is when a potential disaster situation exists that could effect the medical center but does not warrant full activation of the plan (distant severe weather, terrorist threat, major event in the city).

The Alert Phase of the EOP is for notification purposes only. A text message will be sent to all on the "Key Personnel List" and will not require a response to the Emergency Operations Center. (Refer to UHB EOP).

Partial Activation:

The Partial Activation Phase of the EOP is when a disaster situation exists that could effect the medical center but **does not warrant full activation** of the plan (severe weather, environmental issues e.g. flooding)

The Partial Activation Phase is also for situations where there is an emergency situation at the medical center that partially compromises our ability to fulfill the hospitals mission e.g. Emergency Department overcrowding, VIP patient, partial utility failure, planned utility shutdown, equipment failures, etc.

The Partial Activation Phase is to be utilized as a time for senior administration to evaluate the potential needs of the facility and make contingency plans for the specific event. (Refer to UHB EOP).

Full Activation:

The Full Activation Phase of the EOP is to be utilized when a disaster has occurred at the medical center or outside the facility and it is expected to compromise or impact the operations of the hospital.

The Administrator on Duty (AOD) or the Senior Administrator is responsible for assuming the role of Incident Commander (until relieved) and to initiate the **full** activation of the Emergency Operations Plan. (Refer to UHB EOP).

Laboratory Command Center:

During weekday office hours, the Laboratory Conference Room, A2-430, Ext. 2805 will serve as the Laboratory Command Center location.

During off-hours, the Central Accessioning Room, A2-427, Ext. 2815, will serve as the Laboratory Command Center location.

The Downstate @ Bay Ridge Laboratory will fully participate in a disaster situation requiring a partial complete activation of the emergency operations plan.

In the event that a disaster situation exists at the Bay Ridge facility, the SUNY Downstate @ Bay Ridge laboratory coordinator or designee will serve as the site laboratory team leader:

The team leader or designee will follow the listed laboratory administrator responsibilities.

Laboratory Administrator:

The Laboratory Administrator or designee will:

- o Assess staffing and supply needs
- o Act as a liaison between the triage officers and/or the Command Center
- o Maintain Communication Log
- o Reassign staff to address the needs of the situation
- o Initiate calls to inform key laboratory personnel.

The Laboratory Administrator of Designee will activate the Laboratory Command Center.

The Laboratory Shift Supervisor will serve as the designee during off hours.

Supervisors:

Supervisors will coordinate all activities in their laboratories. All laboratory personnel are subject to immediate recall in an effort to mobilize as much manpower as possible. Each supervisor for their areas will evaluate staffing needs.

Morgue Attendant:

The morgue attendant will survey the refrigerator capacity and implement backup procedures, if necessary. Additional bodies may be stored in the Anatomy cadaver refrigerator. The amount of space available is dependent upon the cadaver inventory during the disaster. (See protocol Lab-25). Should the Anatomy cadaver refrigerator fill to capacity, storage outside of UHB will be coordinated through the command center. In the absence of the Morgue Attendant, the Laboratory Administrator or designee will delegate the refrigerator capacity assessment to available personnel.

TOTAL REFRIGERATOR CAPACITY	6
CURRENT MORGUE CENSUS	“ “
AVAILABLE CAPACITY	“ “

Clerical Personnel:

Clerical Personnel will handle all necessary clerical work.

Supplies and Inventory:

The Laboratories shall maintain at a minimum, an inventory of supplies and reagents to support patient testing for one week.

Blood Bank:

The Blood Bank Supervisor will act as liaison between outside blood resources and the Blood Bank to ensure an ample blood supply. A five day inventory for Blood and Blood products is maintained. Inventory will be evaluated and the New York Blood Center (NYBC) will be notified. Arrangements will be made to increase the blood supply. Should the inventory be depleted before restocking, provisions will be made via Hospital Administration to procure addition stock from other suppliers or hospitals, if possible, if appropriate. The following inventory assessment will be provided to the Laboratory Command Center liaison:

Blood Bank	Average Five Day Inventory	Can provide	Urgently needed
Packed RBC's	125 units		
Platelets	3 units		
Cryoprecipitate	70 units		
Fresh Frozen Plasma	200 units		
Other (Specify)	10,000 units		

Specimens and Requisitions:

Should the computer systems malfunction, manual requisitions will be used. All patients must be positively identified. Each specimen and requisition must identify the patient by name or descriptive title and his/her own unique identification number.

In the event of an internal disaster, all specimens will be processed in Kings County Hospital Center.

VI. **ATTACHMENT I : Personnel Contact List**

Attachment I

**PATHOLOGY DEPARTMENT – CLINICAL LABORATORIES
PERSONNEL CONTACT LIST**

Name	Ext.	Beeper / Cell #	Title / Lab	Lab #
Abu-Lawi, Khaled (Ph.D)	8295	917-988-5347	Virology / Serology / Microbiology	1837
Alfaro, Sandra	1679	917-219-4396	Point of Care	1679
Belgrave, Jeronimo	1036	917-760-0821 347-578-4100	Clinical Labs Outreach	1036
Cates, Elaine	718-567-1157	917-232-7107 347-452-4074	Bay Ridge	718-567-1157
Somma, Jonathan (MD)	1667	917-218-2958	Director - Cytology	1666
Daidone, Bennett	2660	917-760-1963	Virology / Serology	1837
Kang, Steven (MD)	8271	917-218-5677 347-304-0648	Director - Blood Bank	4630
Gottesman, Susan (MD/Ph.D)	1661	917-218-6261 347-452-7999	Director - Hematology	1654
Henry, Yolaine	1228	917-760-0820 347-304-1269	OPD / Venipuncture/ Central Accessioning	1228/1221/8217 4216, 2815, 2363
Howanitz, Joan (MD)	1291	917-395-4137	Director - Chemistry	2977
Howanitz, Peter (MD) Director	4522	917-761-3077 347-461-5164	Director - Pathology	4521
Yudlowitz, Maria	1841	347-263-4111	LIS	1841
Jacob, Kathleen	8230	917-219-0177	Microbiology	1657
Yudis, Carmencita	1669	570-470-4146	Director – Bay Ridge	1669
Koo, Jaik	1649	917-760-1623	Surgical Pathology	1648
Lacbawan, Felicitas	2279	301-602-9562	Molecular Diagnostics	1837
Laguerre, Alix (Lab Administrator)	1689	917-760-1449 646-773-4760	Clinical Laboratories	1689
Libien, Jenny	6304	917-218-0554	Director - Autopsy	1669
Mendez, Maria (Sr. Assoc. Administrator)	1684	917-760-0790 347-242-0071	Administration / Labs	1684
Mirra, Suzanne (Chair)	4599	None	Chair - Pathology	2749
Mirza, Pervez	4771	917-219-3025 Prayers Fri 1:00 pm	Clinical Labs – Materials Management	4771
Nicastri, Anthony (MD)	1669	917-996-9251	Director - Surgical Pathology	1669
Norin, Allen	2516	917-992-3967	Director-Transplant Imm.	2516
Ren, Cathy	2657	None	Cytology	1666
Saul, Cheri	1682	917-760-2101	Hematology	1654
Swiderski, Irena	2595	917-996-9215	Blood Bank	4630
Tifigi, Eugenia	2242	917-219-7693	Chemistry/Immunology	2922/2977/1460
CHEMISTRY	O.R. Beeper #: 917-219-4553			
Ly, Amanda	2922	917-996-9224	Chemistry (Week-ends)	2922/2977/1460
Rodriguez, Henry	1640	917-760-1943	Autopsy / Morgue	1640
Silcott, Marjorie	8965	917-996-9224	Chemistry	2922
Emeh, Emmanuel	2922	917-996-9224	Chemistry (Evening)	2922/2977/1460
White, Melissa	2654	None	Blood Bank	2654
Patrick, Carmen	1654	None	Hematology	1654
Feldman, Robin	1654	None	Hematology	1654
Lab Conference Room	2805		A2-430	2805