

# MASS CASUALTY INCIDENT (MCI) AND/OR HAZARDOUS SUBSTANCE

All BCEHS operational ambulances are equipped with an MCI/Triage Unit Level Kit – a black bag stored behind the driver's seat. Any paramedic that is knowingly responding to an MCI or potential triage incident should pull this kit out and review the position checklists with their partner prior to arrival on scene.

The black bag stored behind the driver's seat contains:

- Triage resources,
- Triage function checklists,
- Triage Staging Area layout diagrams.

## **THE FIRST PARAMEDICS AT THE SCENE SHOULD:**

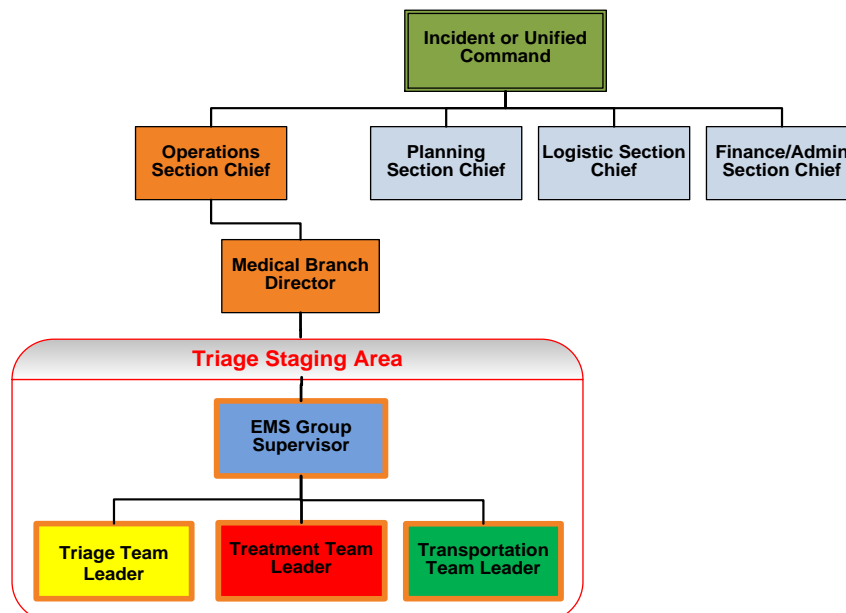
1. Request tactical channel, if available, and not already established for interoperability.
2. Approach from:
  - a. Upwind
  - b. Uphill
  - c. Upstream
  - d. Follow approach directions of other first responders that are first on scene.
3. Establish scene parameters if not already in place:
  - a. Hot Zone
  - b. Warm Zone
  - c. Cold Zone: Establish Incident Command Post (ICP) and Triage Staging Area and determine best triage layout based on scene.
4. If dangerous goods are present:
  - a. Don high-visibility clothing, hardhat and/or other infectious or contaminate-control PPE.
  - b. Look for Hazmat Placards on transportation vehicles. Relay placard details to the [Technical Advisor](#) (TA).
5. Park as close to the scene as possible, but Do Not Park in any debris created by the incident. Avoid downwash from helicopters, if present on scene.
6. Leave vehicle running with Code 3 lights and 4-way flashers on.
7. Secure BCEHS Resource Staging Area and Triage Staging Area.
8. Identify ingress and egress routes and relay information to Dispatch.

## (A) Incident Command

Once the scene is confirmed as an MCI, immediately notify the [TA](#) directly or via Dispatch. Always stage upwind/upstream of the incident, and assess hazards such as dangerous goods, mud or snow slide potential, etc., for incoming units.

### Attendant/Driver

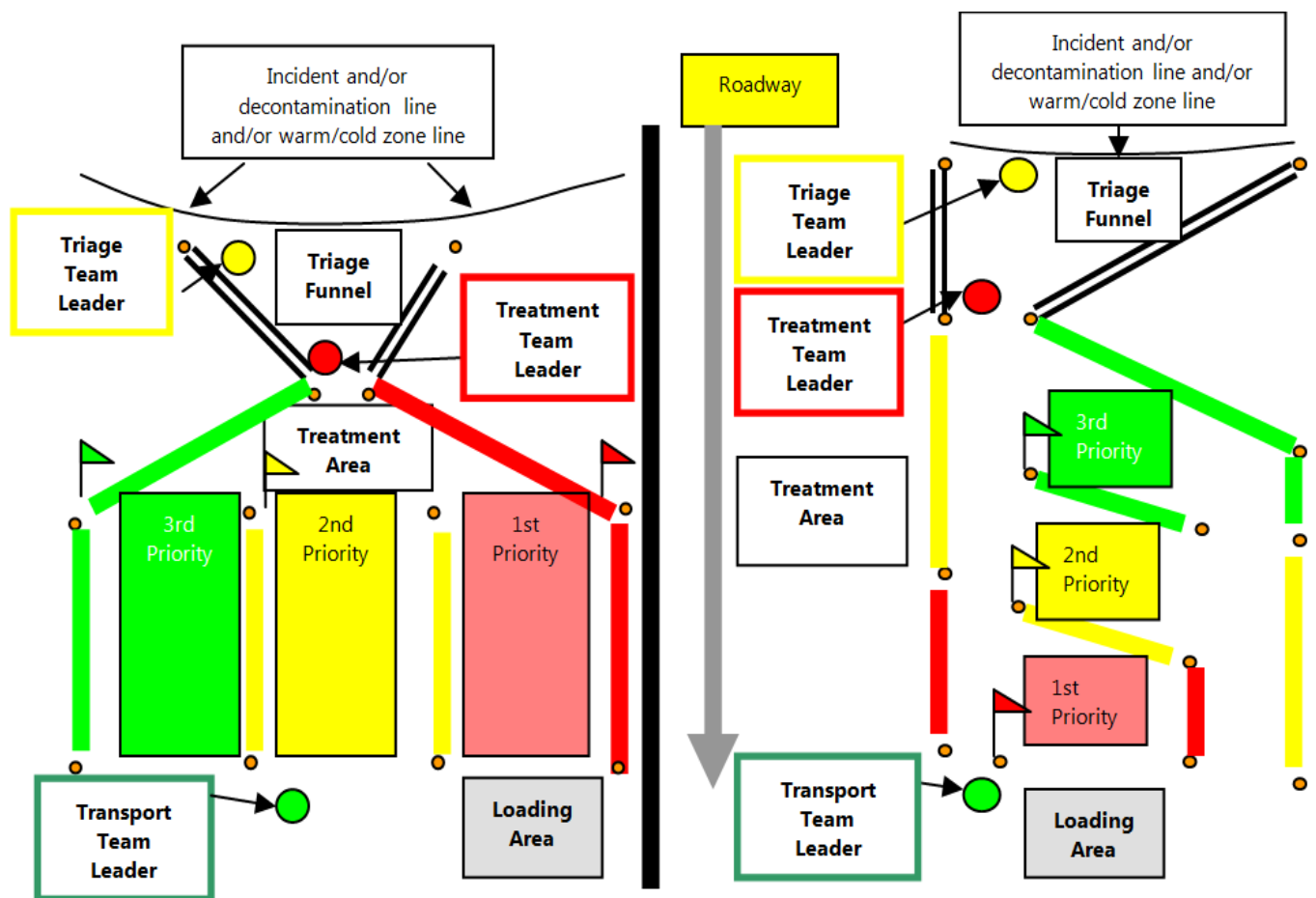
1. Report to the Incident Commander (IC), if there is no command established, assume Incident Command - report back to Dispatch as IC.
2. Conduct a Scene Safety Assessment and report back to dispatch with a cursory update on:
  - a. Number of readily known CASUALTIES and acuity assessments if available,
  - b. Any HAZARDS current or potential
  - c. Scene stability or volatility
  - d. Other services on scene
  - e. Confirm or correct the type of incident and size
3. Establish scene parameters if not already in place:
  - a. Hot Zone
  - b. Warm Zone
  - c. Cold Zone
4. Establish scene access for incoming units:
  - a. BCEHS Resource Staging Area and Triage Staging Area
  - b. Helicopter Landing Zone
  - c. Ingress
  - d. Egress
5. Establish an Incident Command Post (ICP); if first responders from other agencies are on scene establish Unified Command.
6. Working with Dispatch, determine destination hospital(s) and communicate to the **Transport Team Leader**.



## (B) TRIAGE

### Attendant/Driver

1. Conduct a Scene Safety Assessment, if applicable.
2. Count or estimate the casualties and report numbers to Dispatch.
3. Corral the walking wounded and ensures all patients are accounted for at all times.
4. Assume **EMS Group Supervisor** function.
  - a. Ensure all subsequent arriving crews don the appropriate PPE (e.g., orange paramedic safety vests and infectious or contaminate-control if required).
5. Establish a Triage Staging Area in the Cold Zone; determine the best triage layout based on the scene characteristics.



## SECOND AMBULANCE ON SCENE:

### Crew

1. Both members report to the ICP and/or the **EMS Group Supervisor** for assignment.
  - a. If resources allow, assign a scribe to the EMS Unified Commander or **EMS Group Supervisor**.
2. If assigned as **Triage Team Leader** :
  - a. Ensure Triage Staging Area is assembled properly.
  - b. Assign and deploy Triage Team members to field.
  - c. Assign an isolated area to house any fatalities carried into the Triage Staging Area.

**NOTE:** Every effort must be made to house fatalities out of sight of the other patients in the Triage Staging Area.

3. If assigned as the **Treatment Team Leader** :
  - a. Ensure Triage Staging Area is assembled properly (three treatment areas: **Red**, **Yellow** and **Green**).
  - b. Ensure a Deceased Holding Area is established out of sight of the Triage Staging Area.
  - c. Coordinate patient transport with **EMS Group Supervisor** and **Transport Team Leader**.
4. If assigned as the **Transport Team Leader** :
  - a. Coordinate with the **EMS Group Supervisor** and **Treatment Team Leader** in patient transport priorities and hospital destination(s).
  - b. Maintain the BCAS Patient Disposition Log.
  - c. Report all comings and goings of Ambulances to **EMS Group Supervisor**, and include:
    - Unit #
    - Confirmed destination
    - Content
    - Destination ETA
    - Return ETA

## CREWS ARRIVING SUBSEQUENT TO FIRST AND SECOND AMBULANCES ON SCENE:

Follow Dispatch directions to BCEHS Staging Area and report to either the EMS Group Supervisor or the Incident Command Post. At large-scale events, you may be directed to the ICP Staging Area.

1. Mitigate freelancing by following directions of the IC Structure once on scene.
2. Minimize radio communication. Only essential transmissions should be considered.
3. Once on scene:
  - a. Never lock the ambulance up and walk away with the keys.
  - b. Leave vehicle running with keys in the ignition, Code 3 lights and 4-way flashers on.