TBRHSC Prepares for Disasters





By Chen Chekki - The Chronicle-Journal

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Emergency Medical Assistance Team (EMAT) RN Carol Thorold from Sault Ste. Marie tends to a wound on patient Ron Berringer during a disaster simulation at Thunder Bay Regional Health Sciences Centre.

When Thunder Bay needs help caring for 130 people injured from a train derailment and explosion, some might ask for divine intervention from above.

But what could actually arrive is medical intervention from below, in the form of EMAT — Emergency Medical Assistance Team.

The southern Ontario-based team can arrive to the city in about 18 hours, bringing with it up to 80 doctors, nurses, X-ray technicians and patient beds in a tractor-trailer and accompanying vehicles.



The team, run by Ontario's health care ministry, can set up a self-sustaining mini-hospital camp in four to six hours after arriving, and treat patients while powered up on its own mobile generators. It has 56 acute and intermediate care beds that can be put inside portable heated tent pods or in the hospital, and has decontamination facilities for patients who have been exposed to hazardous material from such a train wreck.

And that's what it did on Saturday, in a first-ever trial run in Northwestern

Ontario to test EMAT and local health care officials in their readiness for a disaster that would otherwise overwhelm the hospital.

The derailed train in the mock disaster was carrying chlorine and one of the rail cars exploded.

"It tends to be in a disaster, controlled chaos," said Bruce Sawadsky, medical director for EMAT. Chaotic situations must be brought under control as "best you can," he said.

In what was probably one of the most realistic mock disasters in recent years in Northwestern Ontario and the first for EMAT in the region, role-playing patients were examined at EMAT facilities set up in front of the Thunder Bay Regional Health Sciences Centre.

Patients were first sent to the decontamination booth where health care workers — covered from head to toe in protective gear — sprayed patients down with water and saline before sending them to an injury assessment centre to figure out the extent of their injuries. They were either sent for intermediate treatment for moderate injuries in EMAT's 36 tent pod beds that were replete with breathing tubes, or acute care in EMAT's 20 beds set up on the fly inside the hospital.

There, more than a dozen mock patients could be seen lying on the beds receiving care from health care workers.

The mock scenario was so real that a live baby was used among the dozens of actor victims, most resembling train-wreck patients, with fake blood and bruising visible and distraught facial expressions.

Carried on a stretcher at the hospital site from one EMAT zone to another, one mock victim could be heard yelling, "It hurts."

A medical helicopter was also scheduled to land at the hospital with victims, but was diverted to a real medical call.



EMAT is operated by Ornge (a transport medicine organization) on behalf of Ontario, for which Ornge manages air ambulance service and patient transfers between hospitals. All the supplies EMAT needs are carried by its mobile team, right down to clothes, tape, ladders, stretchers, satellite communications and almost anything else imaginable.

"We can do this in a field," said Marilyn McCrea, vice-president of corporate communications and marketing with Ornge.

A mock patient and family counselling section was also on site to practise dealing with those who become emotionally overcome by disasters.

Sawadsky said the biggest issue facing the hospital's medical team and EMAT during the exercise was communication, both inside and outside the hospital. He said the point of the exercise was for all those involved to become better at emergency responses.

McCrea said that Northwestern Ontario faces "a challenge" using EMAT because of the time needed to arrive to the region.

The test cost \$150,000 to complete. It was the third such test involving EMAT, with the last two taking place in the Niagara area and Kingston.

http://www.tbrhsc.net/patient_information/media_releases/TBRHSC_prepares_for_disast ers.asp