Medical aspects in disaster management

Tahoe 2014
What is MCI in mountain?
MCI in Mountain

- Around 15 major MCI in France over last 10 years
- General considerations
  - few number of victims already MCI in mountain (10 to 15)
  - MCI = When resources are missing to deal with the situation
  - Medical management = Medical care + Organization
  - Each event is unique but principles are the same
  - In mountain, even non injured people can die because they are exposed to fatal hazards
- Theoretical aspect of medical management
Field coordination

Field commander and medical coordinator

Commanding post

Main commander + Dispatching med co

Additional Human and logistical resources

Appropriate Medical facilities

Authorities

Medias
Main Goals in disaster medicine

Saving as many lives as possible

Focusing on organization instead of medical care

Changing spirit: from emergency medicine to disaster medicine

General concept

Setting up an efficient Rescue Chain

First Step

Setting up rescue chain

Collecting information / Fast analysis / First decisions

First medical staff + rescuer on site

Second Step

Setting up commanding chain

Collecting and transmitting accurate information

Medical Coordinator + Operational Commander

Third Step

Setting up communication system.

Organising additional Human and logistical resource

Fourth Step

Strengthening process

Evacuating people to adapted medical facility

Fifth Step

Inform authorities, Media communication strategy

Dispatching Med Coordinator + Main Commander
Search and Rescue

- Define order priority to transfer to AMP
- Survival Basic Life Support:
  - free airway,
  - Haemorrhage control,
  - Cold protection

Medical Triage

- Assessing medical condition
- Defining priority of patient treatment and evacuation (immediate care, urgent treatment, possible delay, out of resources)
Advanced Medical Post

Stabilisation

Evacuation to adapted medical facility
Field coordination

Field commander and medical coordinator

Commanding post

Main commander + Dispatching med co

Additional Human and logistical resources

Appropriate Medical facilities

Authorities

Medias
Tools
Aussois 2012

Simulations

Valloire 2014

La Grave 2014

Valfréjus 2013
What we have learned from simulations (1)

- Communication and Language: the key issue

- Who’s the boss? Leadership!
  - Decision making
  - Coordination

- Be prepared
  - Training
  - Adaptability to different situations, flexibility
What we have learned from simulations (2)

- Available **logistical** items already prepared and adapted to wilderness Environment

- **Medical Chart** adapted to mountain MCI (hypothermia, avalanche...)

- Field **organization check-lists** adapted to mountain

- Available **Communication tools** and strategy
What we have learned from simulations (3)

- Impact point and Field Management = Mountain rescue job!

INTER AGENCY COORDINATION

- Evacuation = classical rescue department
Specific issue: Avalanche MCI

- Double « triage »: Searching and extrication strategy before medical triage
- Accidental hypothermia and Rescue collapse: Not Black but Red! Good survival chance

- Add Avalanche Icar Med com check-list to MCI Chart
Training

- « Disaster medicine » skills to be added to advanced mountain medicine diploma.

- Principles of MCI management needs to be set up on every day base.
  
  When resources < rescue needs

- Regular training
- Regular debriefing and experience sharing
- Do not forget psychological aspects
Conclusion

- Multi-casualty incidents happen in Mountain!
- Few people but big organization and a lot of rescuer.
- Difficult access and evacuation in wilderness environment.

- Adapting right resource to right person in order to save as many lives as possible. Good triage and organisation

- MCI in mountain : Mountain rescue job !
- Mountain Rescue Teams (Medical staff, rescuers, pilots) has to be familiar with Disaster management principles.
Thank you for your attention