MEDSYS HEALTH NETWORK
CENTER FOR BIOTERRORISM PREPAREDNESS AND PLANNING

DECONTAMINATION AND TRIAGE OF CHEMICALLY CONTAMINATED PATIENTS

August 2006

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All inquiries about the “MediSys Decontamination of Chemically Contaminated Patients” may be addressed to:

Bioterrorism Hospital Preparedness Program
c/o NYC Department of Health and Mental Hygiene
125 Worth Street, RM 222, Box 22A
New York, NY 10013
Phone: 212-788-4277
EMERGENCY PREPAREDNESS POLICY AND PROCEDURE

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<th>DECONTAMINATION AND TRIAGE OF CHEMICALLY CONTAMINATED PATIENTS (CODE _____)</th>
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POLICY STATEMENT:

This policy has been developed as an integral component of our emergency preparedness plan to address necessary procedures in identifying, triaging, and caring for patients who may require decontamination after gross exposure to a potentially toxic chemical substance. Patients may become exposed to a chemical substance in several ways including, but not limited to:

- exposure incurred during a household accident
- exposure incurred during an occupational accident
- exposure incurred during the deployment of a chemical compound as a weapon or terrorist act.

Patient(s) may arrive by any number of means and may enter the facility through any of our common public entryways. Patients may also arrive prior to notification of the hospital by law enforcement or FDNY. To effectively address these potentials, we have divided the policy content to address patients who:

- self-refer, and arrive by private or public conveyance (prior to notification)
- self-refer, and arrive by private or public conveyance (after notification)
- arrive via ambulance (after notification).

PROCEDURE FOR SELF-REFERRING PATIENTS (prior to notification):

1.1 Patients may present to the facility through any public entry. Once recognized as potentially contaminated (Hx: patient tells you they were exposed or potentially exposed to a chemical spill / event. Physical signs could include grossly contaminated or wet clothing, noxious odor / off-gassing, upper airway irritation including eye tearing, gross production of nasal secretions, tightness in throat/ chest) hospital staff should:

1.1.2 confine the movement of the patient to prevent cross contamination of additional staff, patients, and the facility;
1.1.3 notify security staff, and the emergency department nurse in charge. Security will notify the switchboard who will page the Decontamination Response Team and transmit a “Code ______”. Security will begin their facility lockdown procedure at the direction of the senior administrator who will assume the Incident Command function if a multiple victim incident is suspected or verified. Personal Protective Equipment will be brought from the emergency department by nursing staff the Decontamination Response Team from the decontamination supply cabinet to the patient and staff members. The responding nurse will don appropriate PPE. The patient will be escorted as appropriate to the external decontamination shower area outside of the emergency department using the shortest exterior route from point of entry.

1.2 When patients present directly to the emergency department, once recognized by the triage nurse as potentially contaminated (Hx: patient tells you they were exposed or potentially exposed to a chemical spill / event. Physical signs could include grossly contaminated or wet clothing, noxious odor / off-gassing, upper airway irritation including eye tearing, gross production of nasal secretions, tightness in throat / chest);

1.2.1 the triage nurse will notify the nurse in charge and the security department. Security will notify the switchboard who will page the Decontamination Response Team and announce a “Code ______”. The triage nurse will direct the ED security officer to activate the external shower and secure the area, and escort the patient to the external decontamination shower area outside the emergency department. Nursing staff will set up appropriate privacy screens.

PROCEDURE FOR SELF-REFERRING PATIENTS (after notification):

2.0 The facility will be secured (locked down) to prevent potential patients who may have been contaminated / exposed from entering the facility and cross contaminating other patients, staff, and visitors at the direction of the senior administrator who will assume the Incident Command function. Alternate Care sites will be activated. Site Access Control personnel will don appropriate PPE and forward screen all persons prior to entering the building through the remaining entryways, referring contaminated / exposed patients to the exterior emergency department entrance for triage and potential decontamination via the shortest exterior route.

PROCEDURE FOR SETTING UP FORWARD TRIAGE AND DECONTAMINATION STATION:

3.0 The Emergency Department will prepare to set up forward triage at the direction of the Incident Commander as an integral component of the “Code ______” response. Site Access Control personnel will establish and secure the pre-determined perimeter until the operation is functional.
3.1 Engineering, together with trained staff members will deploy the decontamination tent forward of the emergency department entrance. Engineering will provide all appropriate utility connections and ensure functionality of all components informing the nurse in charge upon completion.

3.1 Building Services will set up __#__ conference tables with __#__ chairs at the forward entrance of each decontamination shelter for staffing by __#__ Patient Triage personnel.

3.2 Patient Triage personnel will don appropriate PPE and bring appropriate triage supplies forward to include __#__MARK 1 auto-injectors, and __#__ sets of patient ID and personal / valuable belonging sets.

3.3 Patients who present to the emergency department will have a rapid triage assessment to determine the correct care venue as follows:

3.3.1 Not exposed / contaminated with minor illness/injury: to ambulatory care.

3.3.2 Not exposed / contaminated with life threatening illness/injury: ED walk-in entrance.

3.3.3 Not exposed / contaminated with no illness/injury (worried well): to mental health counseling site.

3.3.4 Claimed exposure / contamination with no outward signs (Hx: patient tells you they were exposed or potentially exposed to a chemical spill / event. Visible signs exclude grossly contaminated or wet clothing, noxious odor / off-gassing. Symptoms exclude upper airway irritation, eye tearing, gross production of nasal secretions, tightness in throat / chest), with stable vital signs: patient should be directed to self-decontamination shower* (see decontamination protocol).

3.3.5 Gross exposure / contamination with outward signs (Hx: patient tells you they were exposed or potentially exposed to a chemical spill / event. Visible signs could include contaminated or wet clothing, noxious odor / off-gassing, but excludes any physical symptoms), with stable vital signs: patient should be directed to self-decontamination shower* (see decontamination protocol).

3.3.6 Claimed / Gross exposure / contamination with outward signs (Hx: patient tells you they were exposed or potentially exposed to a chemical spill / event. Visible signs include grossly contaminated or wet clothing, noxious odor / off-gassing. Symptoms include upper airway irritation, eye tearing, gross production of nasal secretions, tightness in throat / chest), with stable vital signs: patient should be directed to assisted decontamination shower* (see decontamination protocol).
3.3.7 Claimed / Gross exposure / contamination with outward signs (Hx: patient tells you they were exposed or potentially exposed to a chemical spill / event. Visible signs *include* grossly contaminated or wet clothing, noxious odor / off-gassing. Symptoms *include* upper airway irritation, eye tearing, gross production of nasal secretions, tightness in throat / chest), with unstable vital signs: patient should be assisted to the decontamination shower* (see decontamination protocol).

3.3.8 For patients that are symptomatic who may be at risk for decompensating, treatment with a Mark 1 auto injector *should be considered* prior to decontamination. If the chemical substance is identified as organophosphate based, treatment with MARK 1 auto-injectors prior to patient decontamination *is recommended* prior to decontamination (see DUMBELS acronym at end of document).

3.3.9 Should the facility become overwhelmed with event related casualties, the START Triage Flowchart can be utilized as a template for customization based on the causal event:

![START Triage Flowchart](image)
PROCEDURE FOR PATIENTS ARRIVING VIA AMBULANCE:

3.0 Patients who are removed from a chemical accident / incident by EMS will most likely be identified as contaminated prior to removal from the incident scene. As such, the FDNY along with other public health, emergency services, and utility management organizations will typically set up on-scene decontamination operations to mitigate and confine cross contamination from patients to care givers. Patient Triage personnel at the ambulance entrance will establish ED operations and scene management to ensure that forward triage identifies any patient not adequately decontaminated at the scene.

3.1 Current FDNY policy requires notification be made to the emergency department prior to or during transport to the receiving hospital. Current FDNY policy requests that ED nursing staff meet the ambulance crew and patient outside the ED. The establishment of forward triage and decontamination early in the incident ensure this guideline is exceeded.

3.11 Patients who have been confirmed as adequately decontaminated at the scene of an incident require no further decontamination actions by the hospital based ED staff.

DECONTAMINATION SHOWER PROTOCOL

4.0 The external decontamination shower area will be divided into five areas with appropriate privacy screens surrounding each area:

- Stage I – forward triage area – patient venue is decided after assessment by Patient Triage personnel
- Stage II - a dry changing area where patients will be instructed Initial Contact and Stripper / Bagger personnel to ensure and assist in removing all jewelry and valuables and place articles in separate clear plastic patient valuables bag to be vouchered. Patients will be instructed to place clothing in a second clear plastic bag and tie off or seal the bag. Clothing may be turned over to law enforcement as evidence or destroyed.
- Stage III - a shower area with an overhead showerhead with built in soap dispensing. The shower area will be prepared with a grate or platform to prevent the patient from standing in run-off water as the shower commences. This stage shall be overseen by Washer / Rinser personnel.
- Stage IV – a shower area with an overhead showerhead with a clear water rinse feed. The shower area will be prepared with a grate or platform to prevent the patient from standing in run-off water as the shower commences. This stage shall be overseen by Washer / Rinser personnel.
• Stage V – a dry area where the patient can dry off and don hospital provided gown / scrubs or be covered with blankets / sheets as appropriate. This stage shall be overseen by Drier / Gatekeeper personnel.

4.1 Patients will then be directed to the shower area maintaining the patient’s privacy to the greatest degree possible. If the patient presents with any oily residue in his/her skin surfaces, patient will be instructed to blot up residue with talcum powder prior to entering the wet area.

4.2 After a thorough shower and complete rinse, the patient will be provided a hospital gown, sheet, blanket, and disposable slippers as appropriate and directed by the Drier / Gatekeeper into a patient care area in the emergency department for assessment.

4.3 Patients will be registered utilizing the disaster registration policy. The patient’s personal property will be labeled with the property label by Stripper / Bagger personnel, establishing a chain of custody.

4.4 Stretcher bound patients and patients who require nursing assistance - Decontamination Team staff will don appropriate PPE available in the ED Decontamination Equipment cabinet and perform shower stages showering the patient as outlined above.

NOTES:

An asterisk ( * ) is utilized in this policy document to denote that caregivers are available to observe and assist patients through all stages of the shower operation. Caregivers are donned in appropriate level PPE and have been in-serviced to fulfill various roles as outlined in the facilities job-action sheets.

DUMBELS Acronym:

D – diarrhea
U – urination
M – miosis
B – bradycardia / bronchorrhea / bronchospasm
E – emesis
L – lacrimation
S – sweating / salivation / secretions
Appendices:

JAS – Decon Response Team Leader
JAS – Decon Initial Contact Unit Leader
JAS – Decon Patient Triage Unit Leader
JAS – Decon Set-up and Support
JAS – Decon Site Access Control
JAS – Decon Stripper & Bagger
JAS – Decon Washer & Rinser
JAS – Decon Dresser/Dryer & Gatekeeper
JAS – Decon Safety Officer
Decontamination Response Team Leader

You Report To: ______________________

You Supervise: ______________________

**Treatment Area Director**

EOC Telephone: ______________

**Decontamination Response Team Unit Leaders**

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**Mission**

Organize and direct aspects relating to the Decon Response Team. Carry out directives of the Incident Commander. Coordinate with the Decon Safety Officer and supervise the Decon Site Access Control Unit Leader, Decon Initial Contact Unit Leader, Decon Patient Triage Unit Leader, Decon Stripper / Bagger Unit Leader, Decon Washer / Rinser Unit Leader, Decon Drier / Dresser / Gatekeeper Unit Leader and Decon Setup / Support Unit Leader.

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**Immediate Actions**

- Request and receive incident briefing.
- Put on appropriate identification (i.e., vests, hard hat, arm-band, label with employee’s name on PPE).
- Ensure that hospital response plan has been activated.
- Ensure that appropriate notifications have been initiated.
- Ensure that communications with the local EMS have been initiated.
- Activate the facility’s Incident Command structure.
- Initiate and maintain communications with the Treatment Area Director.
- Review this Job Action sheet.
- Initiate Unit Activity log.
- Activate the Decontamination Response Team.
- Brief Decon Response Team.
- Review hand signals and emergency response procedures.
- Give Decon Response Team their assignments.
- Monitor and determine resource needs.
- Anticipate / request additional resources as required.
- Develop the flow plan of hospital personnel, equipment, and patients through the Contamination Reduction Corridor.
- Monitor and supervise the operations of the Decon Response Team.
- Monitor and supervise establishment of the Contamination Reduction Corridor (if not pre-established) (may be delegated).
- Control the movement of people / equipment within the Contamination Reduction Corridor (may be delegated).
- Maintain communications with and coordinate operations with Decon Site Access Control Unit Leader, Decon Triage Unit Leader, and other Decon Response Team Unit Leaders.
Monitor number and medical needs of patients reporting through decontamination. Initiate, maintain, and update communications with the Treatment Area Director on number and status of patients.

Coordinate the transfer of decontaminated patients requiring medical attention to the Decon Triage Unit Leader.

Coordinate the handling, storage, and transfer of equipment and contaminants within the Contamination Reduction Zone.

Ensure that all clothing, personal property, and equipment is properly bagged, labeled, stored, and secured.

Ensure the maintenance of a chain of custody where applicable.

Supervise the deactivation of Decon Response Team and Contamination Reduction Corridor.

Intermediate Actions

Arrange for the appropriate disposition of contaminated (or potentially contaminated) items and products of decontamination.

The Decontamination Response Team Leader will be responsible for all contaminated items in the Contamination Reduction Corridor until proper transfer is completed and recorded in the Unit Activity log.
Decontamination Initial Contact Unit Leader

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**Decon Response Team Leader**

EOC Telephone: ______________  Decon Initial Contact Unit Staff

**Mission**

Greet contaminated patient(s) and provide escort to the Contamination Reduction Corridor to be decontaminated. Be the communicator between the Decon Resource Team (contaminated zone) and the Decon Response Team Leader (clean area).

**Immediate Actions**

- Request and receive incident briefing.
- Put on appropriate identification (i.e., vests, hard hat, arm-band, label with employees name on PPE).
- Acquire decon internal tool kit and communication radio (if available).
- Check inventory of tool kit and test radios.
- Initiate and maintain communications with Decon Response Team Leader regarding the Hot Zone and Warm Zone.
- Report for medical baseline.
- Don appropriate PPE.
- Don appropriate unique identifier.
- Establish and maintain visual / verbal contact with the Decon Response Team members.
- Review hand signals with Decon Response Team members.
- Observe Decon Response Team members for safe practices, stress, and immediately report any change in status to the Decon Safety Officer.
- Check for Decon Resource Team members PPE.
- Assume position as point “greeter” outside the ED at Contamination Reduction Corridor. Check the setting of boundary zones (Hot Zone, Warm Zone, and Cold Zone). Secure pylons and tape. Coordinate with Decon Site Access Control Unit Leader.
- Establish communication with Fire Department / Hazmat Team on Scene (at hospital). Coordinate with Fire Department / Hazmat Team.
- Initiate and maintain communications with Decon Site Access Control Unit Leader.
- Verbally and visually guide contaminated patients to Contamination Reduction Corridor.
- Continue visual and verbal contact with contaminated patients to assist in maintaining a secure patient flow through the Contamination Reduction Corridor.
- May assist Stripper / Bagger if census allows.
Intermediate Actions

- At deactivation or fatigue rotation, reports to Contamination Reduction Corridor and performs self-decontamination.
- Report for medical monitoring prior to release or reactivation.
### Decontamination Patient Triage Unit Leader

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#### Decontamination Unit Leader

EOC Telephone: ______________

#### Decon Patient Triage Unit Staff

### Mission
Sort contaminated patients according to priority: ability to ambulate, types and levels of contamination, and ensure their disposition to the Contamination Reduction Corridor.

### Immediate Actions
- Request and receive incident briefing.
- Put on appropriate identification (i.e., vests, hard hat, arm-band, label with employee’s name on PPE).
- Acquire decon internal tool kit and communication radio (if available).
- Initiate and maintain communications with Decon Response Team Leader and Decon Initial Contact Unit Leader.
- Report for medical baseline.
- Don appropriate PPE.
- Don appropriate unique identifier.
- Visually and verbally triage patient.
- Utilizing the Chemical Detection Device (Chemical) and or Geiger counter (Radiation), screen all patients for the presence of contamination.
- Indicate the level of contamination detected on the patients wristband and place band on victim’s left wrist.
- Segregate patients into ambulatory, non-ambulatory, male, female, self-decon, assisted decon, no decon, and safe refuge.
- Triage segregated groups to establish decon priority.
- Report patient census and status to Decon Response Team Leader
- May assist Stripper / Bagger if census allows.

### Intermediate Actions
- At deactivation or fatigue rotation, reports to Contamination Reduction Corridor and performs self-decontamination.
- Report for medical monitoring prior to release or reactivation.
### Decontamination Response Team Setup / Support Unit Leader

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<tr>
<td>Decon Response Team Leader</td>
<td>Decon Setup / Support Unit staff</td>
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<td>EOC Telephone:</td>
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**Mission**

Set up and provide supplies to the Contamination Reduction Corridor, for patient(s) or for the Decon Response Team. Supervise the clean-up of contaminants and equipment. Arrange for disposition of contaminated items.

**Immediate Actions**

- *Request and receive incident briefing.*
- Put on appropriate identification (i.e., vests, hard hat, arm-band, label with employee’s name on PPE).
- Ensure that appropriate notifications have been initiated.
- Initiate and maintain communications with Decon Response Team Leader.
- Review this Job Action sheet.
- Give Decon Set Up / Support personnel their assignments.
- Monitor and determine resource needs.
- Anticipate / request additional resources as required.
- Assure that Decon Setup / Support personnel have necessary PPE (as appropriate).
- If donning PPE, report for medical baseline assessment.
- Don and check PPE.
- Oversee set up of Contamination Reduction Corridor.
- Oversee set up of access control.
- Oversee set up of tarps, privacy corridors, decon showers, containment, and ancillary equipment.
- Oversee set up of Decon Response Team supplies.
- Communicate with Decon Response Team.
- Assist the Decon Response Team as needed (i.e., donning PPE).
- Coordinate availability of supplies and equipment as requested by Decon Response Team Leader.
- Standby to assist in emergency retrieval of personnel if needed (using proper PPE).
- Assist in the deactivation of Decon Response Team and Contamination Reduction Corridor.
Intermediate Actions

- Arrange for the disposition of contaminated items and solutions to the agency responsible for cleanup as directed.
- Supervise the clean-up of contaminant and equipment as directed.
Decontamination Site Access Control Unit Leader

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<td><strong>Decon Response Team Leader</strong></td>
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<td>Decon Site Access Control Staff</td>
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**Mission**
Establish Safe Refuge Area. Prevent access and egress from contaminated patients or substance into the facility.

**Immediate Actions**
- *Request and receive incident briefing.*
- Put on appropriate identification (i.e., vests, hard hat, arm-band, label with employee’s name on PPE).
- Ensure that appropriate notifications have been initiated.
- Initiate Facility Lockdown.
- Ensure that appropriate action is taken to prevent the spread of contamination.
- Initiate that potentially contaminated patients are directed to the Contamination Reduction Corridor.
- Review the Job Action sheet.
- Give Decon Site Access personnel their assignments.
- Assure that Decon Site Access personnel have appropriate PPE, if necessary.
- Monitor and determine decon site access resource needs (flags, barrier tape, pylons, signs).
- Anticipate / request additional resources as required.
- Monitor communications.
- Assist in the setup of access control at the Contamination Reduction Corridor.
- Assume authority and responsibility for traffic control.
- Assume authority and responsibility for scene control and patient access to Contamination Reduction Corridor.
- If warranted, establish a Safe Refuge Area.
- Monitor access to the Safe Refuge Area to ensure that it is not subject to the spread of contamination.
- Coordinate activities with local law enforcement, fire, and Hazmat Team.
- Monitor environmental changes.
- Communicate with Decon Response Team.
- Monitor activities of Decon Response Team.
- Maintain Unit / Activity log.
- Ensure that security personnel report through self-decon and medical monitoring if appropriate.
Intermediate Actions

- At deactivation or fatigue rotation, reports to Contamination Reduction Corridor and performs self-decontamination.
- Report for medical monitoring prior to release or reactivation.
### Decon Stripper / Bagger

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**Decon Response Team Leader**

**EOC Telephone: ______________**

**Decon Stripper / Bagger Unit Staff**

**Mission:**
Supervise Decon Team staff who may be asked to assist in the removal of patient’s clothing, assist with placing patient valuables and clothing into bags and labeling them for identification and tracking purposes.

**Immediate Actions**
- Request and receive incident briefing.
- Acquire decon stripper / bagger tool kit and communication radio.
- Check inventory of tool kit and test radios.
- Initiate and maintain communications with Decon Response Team Leader.
- Report for medical baseline.
- Don appropriate PPE.
- Establish visual / verbal contact with the Decon Resource Team at all times.
- Review hand signals with Decon Response Team.
- Observe Decon Response Team members for safe practices and stress, immediately report any change in status to the Decon Safety Officer.
- Check for Decon Response Team members PPE.
- Assume task as point “Stripper / Bagger” outside the ED at Contamination Reduction Corridor.
- Check the setting of boundary zones (Hot, Warm, Cold), security pylons and tape. Ensure that decon kits are available and accessible to your area.
- Check the placement of washable chairs in the stripper / bagger area of the Contamination Reduction Corridor.
- Make visual / verbal contact with patient(s)
- Provide sealable plastic bags to patient for personal effects and for personal clothing.
- Assist patient in their removal of personal items and clothing. Assist in the bagging of items and label.
- Appropriately handle, store, and transfer patient items, effects, clothing, equipment, and contaminants within the Contamination Reduction Corridor.
- Ensure that all clothing, personal property, and equipment is properly bagged, labeled, stored and secured.
- Ensure the maintenance of chain of custody where applicable.
- Provide decon kit to patient(s).
- Instruct patient in decon procedure verbally as well as through universal signage.
• Continue visual / verbal contact with patient to assist in maintaining a secure patient flow through the Contamination Reduction Corridor.
• Assess resources inventory and needs. Report need to Decon Response Team Leader.
• Maintain contact with Decon Initial Contact Unit Leader.
• May assist Washer / Rinser if census allows.

Intermediate Actions
• At deactivation or fatigue rotation, reports to Contamination Reduction Corridor and performs self-decontamination.
• Report for medical monitoring prior to release or reactivation.
Decon Washer / Rinser

You Report To: ________________________
Decon Response Team Leader
EOC Telephone: ___________

You Supervise: _______________________
Decon Washer / Rinser Unit Staff

Mission:
Supervise Decon Response Team staff who may be asked to assist with the washing and bathing of patients.

Immediate Actions
- Request and receive incident briefing.
- Acquire decon Washer / Rinser tool kit and communication radio.
- Check inventory of tool kit and test radios.
- Initiate and maintain communications with Decon Response Team Leader.
- Report for medical baseline.
- Don appropriate PPE.
- Establish visual / verbal contact with the Decon Response Team at all times.
- Review hand signals with Decon Response Team.
- Observe Decon Response Team members for safe practices and stress. Immediately report any change in status to the Decon Safety Director.
- Check for Decon Response Team members PPE.
- Assume task as point “Washer / Rinser” outside the ED at Contamination Reduction Corridor.
- Check the setting of boundary zones (Hot, Warm, Cold), security pylons and tape. Ensure that decon kits are available and accessible to your area.
- Check the placement of decontamination shower and equipment within the area of the Contamination Reduction Corridor.
- Make visual / verbal contact with patient(s)
- Instruct patient in decon procedure verbally as well as through universal signage.
- Continue visual / verbal contact with patients to assist in maintaining a security patient flow through the Contamination Reduction Corridor.
- Assess resources inventory and needs. Report need to Decon Response Team Leader.
- Maintain contact with Decon Initial Contact Unit Leader, Stripper / Bagger, Dresser / Gatekeeper.
- May assist Stripper / Bagger or Dresser / Gatekeeper if census allows.

Intermediate Actions
- At deactivation or fatigue rotation, reports to Contamination Reduction Corridor and performs self-decontamination.
- Report for medical monitoring prior to release or reactivation.
Decon Dresser / Gatekeeper Unit Leader

You Report To: ____________________________

You Supervise:

*Decon Response Team Leader*

EOC Telephone: ______________

Decon Dresser / Gatekeeper Staff

**Mission**

Supervise Decon Team Dresser / Gatekeeper staff who may be asked to check for the continued presence of contamination, assist in drying and dressing decontaminated patients, as well as instructing patients in admission procedures and tracking information.

**Immediate Actions**

- Request and receive incident briefing.
- Acquire decon dresser / gatekeeper tool kit and communication radio.
- Check inventory of tool kit and test radios.
- Initiate and maintain communications with Decon Response Team Leader.
- Report for medical baseline.
- Don appropriate PPE.
- Establish visual / verbal contact with the Decon Response Team at all times.
- Review hand signals with Decon Response Team.
- Maintain visual / verbal contact with Decon Resources at all times.
- Check for Decon Response Team members’ PPE.
- Assume task as point “Drier / Gatekeeper” outside the ED at Contamination Reduction Corridor.
- Check the setting of boundary zones (Hot, Warm, Cold), security pylons and tape. Ensure that decon kits are available and accessible to your area.
- Check the placement of clothing, admission kits, and equipment within the area of the Contamination Reduction Corridor.
- Make visual / verbal contact with patient(s)
- Note the level of pre-decon chemical or radiological contamination indicated on the patient’s wristband.
- Screen all victims with Geiger counter, checking for the continued presence of Radiological contaminant.
- Screen all victims with handheld chemical detection device, checking for the continued presence of chemical contaminant.
- If post-decon contamination levels indicate inadequate decontamination, direct the patient back to the showers for additional washing / rinsing.
- Assist patients in donning clothing.
- Instruct patient in admission procedure verbally and through universal signage.
- Initiate patient tracking documents and transfer any triage information to clean tracking document.
- Maintain contact with Decon Response Team Leader.
Decon Safety Officer

You Report To: __________________________________________

Decon Safety Officer

You Supervise:

Decon Response Team Leader

EOC Telephone: ______________

Decontamination Response Team

Mission

Monitor and have the authority over the safety of decontamination operations and hazardous conditions. Organize and enforce employee protection and traffic security. The Safety Officer has the authority to modify, alter, or stop the decontamination process and order personnel leave the dangerous area.

Immediate Actions

- **Request and receive incident briefing.**
  - Put on appropriate identification (i.e., vests, hard hat, arm-band, label with employee’s name on PPE).
  - Acquire resource material as needed (i.e., resource manuals, notification lists).
  - Initiate and maintain Safety Plan.
  - Initiate and maintain communications with Decon Team Leader, Decon Setup / Support Unit Leader, and EOC Safety Officer.
  - Provide technical support to Decon Response Team Leader and Decon Setup / Support Unit Leader.
  - Coordinate medical baseline of Decon Response Team staff.
  - Retain medical baseline information and continue to monitor Decon Response Team.
  - Ensure that proper PPE is selected and donned correctly.
  - Continue to monitor PPE protective ability to hazardous substances.
  - Establish and maintain verbal contact with Decon Response Team members.
  - Monitor Decon Response Team members for stress. Report immediately any change in status to Decon Response Team Leader.
  - Assume position as Decon Safety Officer within the ED, if appropriate.
  - In conjunction with Decon Setup / Support Unit Leader, establish environmental monitoring of the Contamination Reduction Corridor (if appropriate and available).
  - Inform Decon Response Team Leader of correct safe work practices.
  - Establish communications and coordinate operations with hazardous materials resources as needed and if available.
  - Check communications with resources such as Poison Control, CHEMTREC, County Health, Hospital Lab, County Lab, Local Fire
Department and Hazmat Team, National Response Team, State Agricultural Authorities, etc.

- Review multiple sources of reference material.
- If the contaminate is known, identify and report hazards to team and Decon Response Team Leader.
- Continuously evaluate and recommend facility / staff protective action options to Decon Response Team Leader.
- Advise the Decon Response Team Leader of deviations from safe work practices or of any dangerous situations.
- Ensure the protection of the Decon Response Team members from physical, environmental, biological, chemical hazards or exposures.
- In conjunction with the Decon Response Team Leader, the Decon Safety Officer has the authority to alter, suspend, or terminate any activity that may be judged to be unsafe.
- Assess resource inventory and needs, report to Decon Response Team Leader.
- When Decon Response Team deactivates or fatigue rotation, Decon Safety Officer coordinates medical assessment of resource team members.

**Intermediate**

- Provide debrief report prior to deactivation or release.
- File Safety Plan with Decon Response Team Leader