SUBJECT: Surgeon Plan for Mass Casualty Event (MCE) **PAGE:** 1 of 3
REVIEWED/UPDATED: 3/23   **EFFECTIVE: 9/14/2023**

RECOMMENDATION(S): A. Bhavaraju, MD   **APPROVAL: 9/14/2023**
CONCURRENCE(S): Trauma Faculty

PURPOSE:
To define the rapid mobilization of UAMS Division of Acute Care Surgery resources during Mass Casualty Events (MCEs)

DEFINITIONS:
Mass Casualty Events (MCEs): An event that overwhelms the local healthcare system, where the number of casualties vastly exceeds the local resources and capabilities in a short period of time.

Incident Commander (IC): Person responsible for overseeing all hospital MCE-related operations
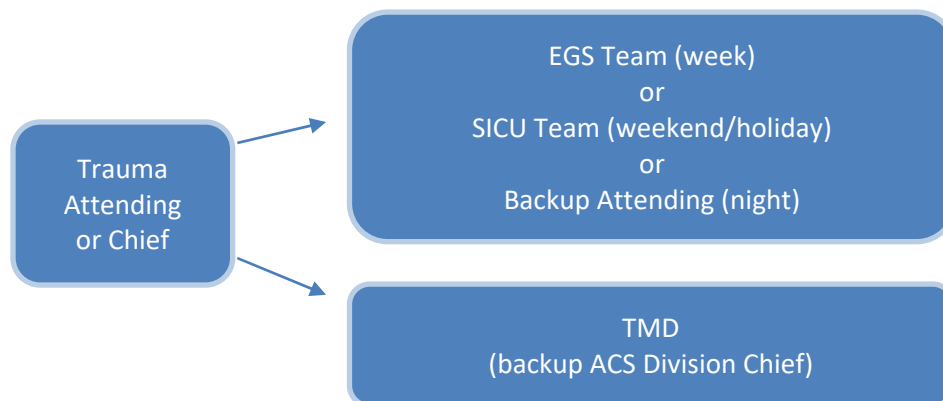
GUIDELINE:
1. ACS Mobilization will follow the UAMS MCE Activation Level Flow Chart from lowest to highest (3 ---> 2 ---> 1)
2. Guideline initiated via activation of the UAMS MCE Activation System by the ED Attending & ED Charge RN in conjunction with the Incident Commander (IC)
    a. IC requests MEDICAL ALERT – MASS CASUALTY: LEVEL 3, 2, or 1

LEVEL 3 (Stand By)
- On-call Trauma Attending notified of Level 3 MCE by ED Attending or Charge Nurse
- On-call Trauma Attending NOTIFIES the following
    - UAMS TMD (ACS Division Chief is the backup)
    - Weekday 0700 – 1700
        - On-call EGS attending
            - Notifies EGS chief and midlevel residents
        - Trauma Chief resident
    - Weekend/Holiday 0700 – 1700
        - On-call SICU attending
        - Trauma Chief & midlevel residents
    - 1700 – 0700
        - Night resident team
        - Backup attending
- No change in day-to-day operations

Phone tree:

These guidelines were prepared by the UAMS ACS Division. They are intended to serve only as a guideline based on current review of the medical literature and practice. They are neither policies nor protocols. Their use is at the discretion of the managing physician.

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LEVEL 2 (Pre-Stage)
- 0700 – 1700
    - On-call Trauma, EGS, & SICU Teams report to the ED (if not currently encumbered)
    - Procedures or operative cases not already started go on delay
    - SICU Attending serves co-triage officer
    - SICU Fellow mobilizes SICU resources and downgrades patients as allowable
    - EGS & Trauma APRNs downgrade in patients and discharge patients as allowable
- 1700 – 0700
    - Night team, Backup attending, and SICU attending from previous day report to the ED
    - SICU previous day attending serves as co-triage officer
    - Night SICU resident mobilizes SICU resources (with day SICU fellow) -----> downgrades and moves patients out of SICU

Phone tree:
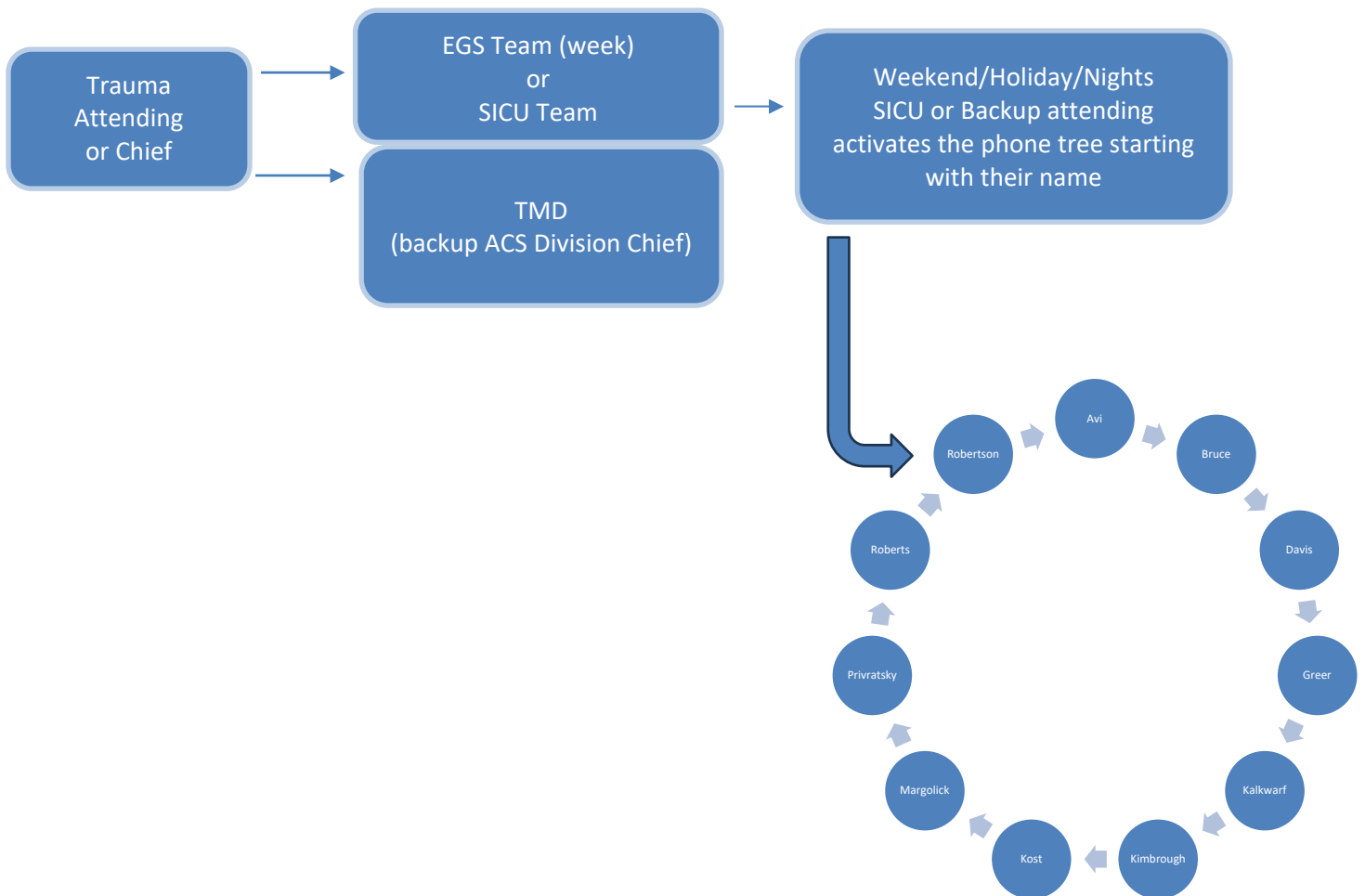
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LEVEL 1 (Full EOC)

- ALL HANDS ON-DECK – everyone plans to stay until not needed or another schedule is developed
- 0700 – 1700
  - On-call Trauma, EGS, & SICU Teams report to the ED (if not currently encumbered)
  - Procedures or operative cases not already started go on delay
  - SICU Attending serves co-triage officer
  - SICU Fellow mobilizes SICU resources and downgrades patients as allowable
  - EGS & Trauma APRNs downgrade in patients and discharge patients as allowable
  - SICU Fellow & APRNS mobilize SICU resources ----> free up SICU beds
  - Trauma & EGS APRNs work on freeing up F4 and floor beds – expedite DCs & transfers
  - ALL SONC/CRS, Thoracic, Transplant residents report to the ED
  - EGS/SONC/Thoracic/Transplant PGY3s & 2s help triage and work on patient flow
  - Trauma/EGS/SONC/Thoracic PGY1s work on orders; messenger between OR rooms
  - Thoracic, Cardiac, & Vascular Surgery Attendings on stand-by
- 1700 – 0700
  - On-call Trauma and Backup Attendings report to the ED
  - Previous day SICU Attending reports to the ED – assists as co-triage officer
  - Night resident team (PGY4, PGY2, PGY1) report to the ED
  - Night SICU resident mobilizes SICU resources (with day SICU fellow) -----> free up SICU beds
  - Night intern works on orders and messenger between OR rooms

Weekday (0700-1700)

	OR Team 1	OR Team 2	OR Team 3 (flex)	OR Team 4 (flex)
Trauma Attending	Trauma doc	EGS doc	SICU doc	SICU fellow
Resident	Trauma PGY4	EGS PGY5	Thoracic PGY4	SONC/CRS PGY5
Ortho Trauma	#1	#2	#3	#4
Ortho Resident	#1	#2	#3	#4

Weekends (0700-1700)
Night (1700-0700)

	OR Team 1	OR Team 2	OR Team 3 (flex)	OR Team 4 (flex)
Trauma Attending	Trauma doc	Backup doc	SICU doc	SICU fellow
Resident	Night PGY4	Night PGY2	Trauma PGY4	EGS PGY5
Ortho Trauma	#1	#2	#3	#4
Ortho Resident	#1	#2	#3	#4

Next day

	OR Team 1	OR Team 2	OR Team 3 (flex)	OR Team 4 (flex)
Trauma Attending	Trauma doc (day after)	EGS doc (day after)	SONC attending	CRS Attending
Resident	Baptist PGY4/5	Transplant PGY3		
Ortho Trauma	#1	#2		
Ortho Resident	#1	#2		

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Non-deployed ACS Division members, Robertson, Sexton, SONC, CRS Attendings on Standby to help with 2nd wave and takebacks.

Phone tree – Backup attending activates the tree