MEDICAL/TECHNICAL SPECIALIST – RADIOLOGICAL

**Mission:** Advise the Incident Commander or Operations Section Chief, as assigned, on issues related to specific radiological incidents and emergency response. In conjunction with the Medical Care Branch Director, organize and prepare the Emergency Department to receive radiation exposure casualties in a manner consistent with hospital procedures and best practices to preserve the operational integrity of the Emergency Department.

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| Date: Start: End: Position Assigned to: Initial: **Position Reports to:**  Signature: Hospital Command Center (HCC) Location: Telephone: Fax: Other Contact Info: Radio Title:  |

| **Immediate (Operational Period 0-2 Hours)** | **Time** | **Initial** |
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| Receive appointment and briefing from the Incident Commander. |  |  |
| Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification. |  |  |
| Notify your usual supervisor of your HICS assignment. |  |  |
| Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis. |  |  |
| Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research as needed to determine hazard and safety information critical to treatment and decontamination concerns for the victims and personnel. |  |  |
| Verify from the ED Attending and report to the Incident Commander the following information from the scene:* Number and condition of both uncontaminated and contaminated patients
* Type and amount of radioactive isotopes involved
* Type of radiation incident:
	+ External radiation exposure only
	+ External contamination only
	+ External contamination with internal exposure
* Time incident occurred
* Medical problems present besides radionuclide contamination
* Measures taken at the incident site (e.g., air monitors, fixed radiation monitors, nasal smear counts, and skin contamination levels)
* Potential for industrial, biological, or chemical material exposures expected in addition to radionuclide.
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| Direct the preparation of the emergency department for the arrival of victims using PPE dress-out for radiological decontamination response |  |  |
| Designate a person with a survey meter at the entrance of the decontamination room to monitor personnel and equipment leaving the radiation decontamination room. |  |  |
| Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.  |  |  |
| Verify with the Safety Officer and the Security Branch Director that all access to the ED has been secured to prevent media or other non-authorized people from entering into the treatment area during treatment or the decontamination process. |  |  |
| Ensure the monitoring and surveying of hospital staff providing patient decontamination and care from the arrival of the patient through the decontamination and care process, and post-event monitoring of all personnel after care is provided. |  |  |
| Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit. |  |  |

| **Intermediate (Operational Period 2-12 Hours)** | **Time** | **Initial** |
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| Meet regularly with the Incident Commander or Operations Section Chief and Branch Directors to update current situation and conditions.  |  |  |
| Continue to ensure appropriate decontamination processes including:* Monitoring patients and decontamination team during and after the care of the patient(s).
* Surveying of the contaminated areas, patients and exposed personnel.
* Collecting samples for subsequent analysis.
* Collecting and managing any radioactive wastes (solid and liquid) generated during the decontamination process.
* Evaluating staff dosimeters and ensuring proper follow-up if indicated.
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| Ensure use of all safety practices and procedures. |  |  |
| Prepare and maintain records and reports.  |  |  |

| **Extended (Operational Period Beyond 12 Hours)** | **Time** | **Initial** |
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| In collaboration with the Operations Section’s HazMat Branch Director, oversee final personnel clearance checks and report clearance to the ED attending, Medical Care Branch Director, Employee Health and Well-Being Unit Leader and Operations Section Chief:* Ambulance and attendants
* Route from ambulance entrance to radiation decontamination room
* Radiation decontamination room
* Patient(s) and staff
 |  |  |
| Direct monitoring of facility decontamination processes as needed, in collaboration with the HazMat Branch Director. |  |  |
| Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques. |  |  |
| Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the Employee Health & Well-Being Unit Leader. Provide for staff rest periods and relief. |  |  |
| Upon shift change, brief replacement on the status of all ongoing operations, issues and other relevant incident information. |  |  |

| **Demobilization/System Recovery** | **Time** | **Initial** |
| --- | --- | --- |
| Ensure analysis of all specimens taken from potentially contaminated items or water. |  |  |
| Ensure staff and Employee Health and Well-Being Unit Leader is aware of any significant information resulting from exposure to radiation and recommendations for follow up care and monitoring. |  |  |
| Ensure the Security Officer has custody of all suspected contaminated evidence for release to proper (verified) authority in a proper container, properly sealed. |  |  |
| Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment. |  |  |
| Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the Operations Section Chief or Incident Commander, as appropriate.  |  |  |
| Upon deactivation of your position, brief the Incident Commander or Operations Section Chief, as appropriate, on current problems, outstanding issues, and follow-up requirements. |  |  |
| Submit comments to the Incident Commander or Operations Section Chief, as appropriate for discussion and possible inclusion in the after-action report; topics include:* Review of pertinent position descriptions and operational checklists
* Recommendations for procedure changes
* Section accomplishments and issues
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| Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required. |  |  |

| **Documents/Tools** |
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| * Incident Action Plan
* HICS Form 207 – Incident Management Team Chart
* HICS Form 213 – Incident Message Form
* HICS Form 214 – Operational Log
* Hospital emergency operations plan
* Hospital organization chart
* Hospital telephone directory
* Radio/satellite phone
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