

**Twisting Your Disaster Plan:  
Lessons Learned from the  
April 27, 2011  
Tuscaloosa Tornado**

**2012 Volunteer Symposium:  
Recovery, Resilience, and Hope After Disaster**

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**Faculty**

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**Objectives**

- Describe the different levels of a disaster
- Describe steps in disaster planning
- Incorporate multi-discipline approach to response
- Lessons learned from the disaster and planning process

**April 27, 2011**

- The day started around 5:30 am with the first tornado that went through north Tuscaloosa County
- DCH treated several patients that morning and activated the disaster protocol which remained in effect all day

**At 1:45 pm, the National Weather Service Issued a Tornado Watch for Most of Alabama**

**April 27, 2011**

- The tornado cut a path 6 miles long through the heart of Tuscaloosa
- It missed the hospital by one-half of a city block

### **What the City Lost in 6 Minutes**

- 12.6% of city destroyed
- 7,000 left unemployed
- 600 businesses lost
- 7,000 homes damaged
  - 3,000 homes destroyed

### **What the City Lost in 6 Minutes**

- 12.6% of city destroyed
- 7,000 left unemployed
- 600 businesses lost
- 2,500 homes damaged
  - 1,257 homes destroyed

### **Trees**

- 6,000 destroyed
- 2,983 stumps
- 231,000 acres

### **Bryant Denny Stadium: 103,000**

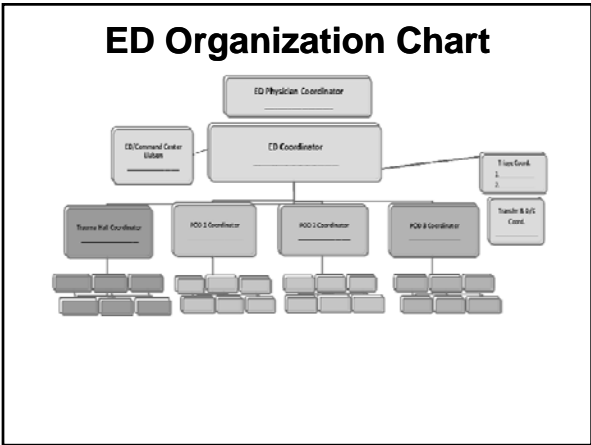
### **How Many Patients?**

- By 8:30 pm we were at capacity in the ER
  - Six alternate care sites were full
  - Used the cafeteria to treat patients

**“Experience: the most brutal of teachers. But you learn, my God you learn.”**

- ### Emergency Department Flow System
- Developed POD and POD coordinator system
  - Incorporating ED Coordinator, Triage Coordinator, and Transfer Coordinator into flow
  - Implement use on a daily basis
    - Routine during a trauma

- ### Emergency Department Flow System
- Implement use in alternative care sites for routine exercises
  - Incorporate external triage into system
    - Also with alternate care sites



- ### Can You Hear Me Now?
- Communication with police, fire, and EMS was difficult
  - Communication in the hospital from floor to floor was only a phone call away
  - Communication in the ER and alternate care sites was a nightmare!

- ### HIPPA How?
- Unidentified patients
  - Children
    - Can't talk
    - Won't talk

- ### We Need Backup!
- Generators at maximum pull
  - Water pressure

### **Medical Staff**

- **What I needed was a Trauma Surgeon!**
  - **What I had were 4 OB's!**

### **Nurses**

- **Did we have enough?**
- **Call help in?**
- **Use Social Media!**

### **Supplies**

- **Rooms**
- **Beds**
- **Bandages**
- **Suture**

### **DCH Regional Medical Center**

- **The ER was covered with not only patients but those looking for loved ones**
- **Finding a place for those seeking only shelter became an issue**
  - **DCH became the light on a hill when darkness fell across Tuscaloosa**

### **Wounds**

- **Goes against what we have always been told**
  - **Leave wounds open!**
  - **No antibiotics!**

### **Summary**

- **Your disaster plan is for logistics**
- **You may have treated patients with these types of crush and long bone injuries before**
  - **The issue is the number of critical patients presenting with these types of injuries**

### **Summary**

- Your disaster plan prepares you for how to respond to the types of patients
  - Your disaster plan does NOT prepare you for the vast number you can potentially treat at one time

### **Summary**

- Practice until you fail and then fix it!
- The goal is to organize the approach to triaging patients and being able to track those patients through the system, while providing optimal care

### **Contact Information**

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