

County of Santa Cruz

HEALTH SERVICES AGENCY

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EMERGENCY MEDICAL SERVICES PROGRAM

Policy No. 1260 Reviewed 01/07

Emergency Medical Services Program

Approved	
Medical Director	

Subject: MEDICAL MANAGEMENT AT HAZARDOUS MATERIALS INCIDENTS

I. Policy

A. Purpose:

The procedure described herein outlines specific medical response procedures and responsibilities once an incident involving hazardous materials (Haz Mat) has been identified.

B. Definitions:

1.Hot Zone (HZ)

Also known as the Exclusion Zone. This is an area in a Haz Mat incident in which contamination exists or is thought to exist. EMS and rescue personnel in this zone must be properly trained and equipped to perform duties in a Haz Mat environment. Such duties may include the use of specialized personal protective equipment and breathing apparatus. In most instances this will mean only the members of a Hazardous Materials Response Team will enter this zone.

2. Warm Zone (WZ)

Also know as the Contamination Reduction Zone. This is an area in a Haz Mat incident adjacent to the HZ where decontamination of personnel and patients occurs. Only those personnel who are properly trained and equipped for the use of specialized personal protection equipment, breathing apparatus and decontamination procedures are allowed in this zone.

3. Cold Zone (CZ)

Also known as the Support Zone. This is an area in a Haz Mat incident where it is designated that no contamination exists. This area is safe for command and support functions without the use of special protective equipment or breathing apparatus. It is in the CZ where the staging of personnel and apparatus takes place as well as the placement of treatment areas and other necessary functions.

C. Objectives:

- 1. To outline a plan of coordinated medical response to victims of hazardous materials incidents.
- 2. To provide specific responsibility assignments to responding ambulances as well as medical control as established via the Base Station Hospitals in Santa Cruz County.
- 3. To provide a guideline for patient, personnel and equipment policies, decontamination, protective measures and treatment.
- D. Operational Principles For Hazardous Material Rescue Operations:
 - 1. There is a direct relationship between the kind of hazardous material and the amount of hazardous material and resultant illness. Exposure can lead to injury or death.
 - 2. On-scene personnel safety takes priority over any immediate rescue or resuscitation concerns.
 - 3. Pre-hospital health care providers will be unable to respond to other emergencies until decontamination of involved equipment and personnel has been accomplished.

II. Activation

- A. This procedural plan will be activated as soon as first responders have either, by <u>suspicion</u> or confirmation, learned of a release of hazardous materials and possible exposure of person(s) to that material.
- B. Hospital Notification

In all cases, hospitals should immediately be made aware of any hazardous materials involved as soon as known by the first responding paramedic ambulance. This early alert will allow the hospitals to prepare for the eventuality of receiving patients from the incident. This notification should be accomplished even if it appears no person has received exposure. This pre-notification also allows lead-time to set up appropriate facilities in the event of the need for decontamination on hospital grounds.

First Responding Ambulance

- Once a hazardous material incident has been either suspect or identified with human exposure, activation of the formal ICS Multiple Casualty Incident Plan should be considered.
- 2. If the ambulance is the first responder, the crew should immediately notify Net-Com to alert all incoming emergency vehicles.

At a minimum, this notification should include:

- a) type of substance, if known;
- b) extent of contamination;
- c) prevailing wind direction;
- d) nearest location and suggested access routes for staging: and
- e) an advisement to Net-Com to activate the appropriate hazardous materials response team.

This information will minimize unnecessary and inadvertent exposure to other public safety personnel and equipment.

3. Thereafter, the ambulance personnel will assume a safe distance. Assistance in determining a safe distance at which to stage can be obtained by utilizing the most current Department of Transportation *Emergency Response Guidebook*. Special care should be taken to evaluate if the first responding crew has also been contaminated due to proximity to the potential Haz-Mat area.

Note: Ambulance personnel shall not use special protective gear or breathing apparatus, nor enter the Hot Zone, or the Warm Zone unless such personnel are specially trained and equipped.

Treatment and Transportation

Only properly trained and equipped Entry or Stand-By Rescue Team members should bring patients from the HZ through the WZ to the CZ. Basic First Aid and BLS treatment may be administered in the HZ and WZ (such as oxygen treatment, bandaging, spinal immobilization, CPR and BLS airway maneuvers). All ALS treatment should be held off until the patient has been cleared.

It is imperative that all contaminated patients are completely decontaminated by the Decontamination Unit prior to any ALS treatment or transport.