

SUBJECT: **MEDICAL CONTROL DURING
HAZARDOUS MATERIAL EXPOSURE**

PURPOSE: To safely manage medical emergencies at a hazardous materials incident while preventing exposure to responders, minimizing exposure to victims through effective decontamination, and preventing or minimizing secondary contamination of transporting vehicles and receiving facilities.

AUTHORITY: Health and Safety Code 1798 (a)

DEFINITIONS:

Decontamination: The process of removing, neutralizing or reducing contamination from personnel or equipment, preventing or minimizing the spread of contamination by persons and equipment.

Hazardous Materials (HazMat) Response Team: An organized team of trained personnel who respond to a hazardous materials incident for the purpose of control and stabilization of the incident. This function is performed by the public fire service within Los Angeles County.

Health Hazmat Response Unit: A response unit within the County of Los Angeles Fire Department responsible for public health issues related to hazardous materials releases. The cities of Pasadena, Vernon, and Long Beach respond their own Health Hazmat Response Unit within their respective jurisdictions.

Medical Alert Center (MAC): Assists the provider agencies and base hospitals with patient destination decisions with multiple casualty incidents. It serves as the control point for VMED28 and ReddiNet® systems.

Medical Communications Coordinator (Med Com): Establishes communications with the MAC or designated base hospital to obtain status of available hospital beds. The Med Com assigns appropriate patient destinations based on available resources. This position receives basic patient information and condition from Treatment Dispatch Manager and provides the MAC or base hospital with information on the assigned patient destinations and transporting ambulance unit.

Poison Control Center: A facility designated by the Emergency Medical Services Authority that provides information and advice to the public and health professionals regarding the management of patients who have or may have ingested, inhaled or otherwise been exposed to poisonous or possibly toxic substances.

Radiation Management Program: This is a County-wide program (Department of Public Health – Environment Health) responsible for protecting the public from unnecessary

EFFECTIVE: 10-21-92
REVISED: 04-01-22
SUPERSEDES: 06-01-18

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APPROVED: 
Director, EMS Agency


Medical Director, EMS Agency

radiation exposure. With the County, Radiation Management works under contract with the California Department of Public Health to provide the delivery of these services.

VMED28 Radio: The VMED28 frequency is the primary method of communications with paramedic providers to coordinate patient destination activities with the Medical Alert Center (MAC). The VMED28 also serves as a back-up communication system for intra-hospital communication and between hospitals and the MAC.

PRINCIPLES:

1. Donning appropriate personal protective equipment (PPE) protects prehospital responders from significant toxic exposure.
2. Accurate information obtained by prehospital personnel about the health effects of the hazardous material ensures appropriate prehospital evaluation and treatment for victims.
3. Decontamination prior to transport minimizes continued exposure of the victim and secondary contamination of health care personnel.
4. Prehospital care provided should be consistent with certification or licensure.
5. To the extent possible, unnecessary contamination of patient transport vehicles, equipment or receiving hospital facilities should be prevented.
6. Early notification of surrounding facilities will assist with efficient deployment of hospital decontamination team members.
7. Receiving hospitals should follow their established guidelines for handling victims of hazardous materials incidents.

POLICY:

- I. Medical Control
 - A. Medical control during a hazardous materials exposure incident shall be provided by a physician and/or mobile intensive care nurse (MICN) from a base hospital.
 - B. Involved base hospital personnel may contact the MAC regarding bed availability, Regional Mobile Response Team activation, poison control information, or other needed medical control services.
- II. Role of EMS personnel:
 - A. Check in with the Incident Commander on scene and coordinate EMS activities with the personnel responsible for decontamination.
 - B. Ensure that proper personal protective equipment is worn.
 - C. Ensure that victims who may have a life threatening condition are treated as soon as possible.

1. If chemical, treat in conjunction with decontamination, if possible.
 2. If radiation, do not delay treatment and transport to decontaminate.
- D. Ensure that victims who do not have a life threatening condition but are contaminated by a hazardous substance are decontaminated before treatment.
- E. Ensure that all victims with chemical contamination undergo decontamination procedures prior to transportation from the scene.
- F. Ensure that patients who are not contaminated are treated consistent with current prehospital care policies and procedures.

III. Role of the Med Com:

Contact the MAC via VMED28 or landline at (562) 378-1789 or the assigned base hospital and provide the following information:

1. Incident location
2. Hazardous material involved (if known)
3. Number and severity of victims
4. Chief complaint of patients
5. Measures already implemented to limit exposure and decontaminate victims
6. Other information as noted in Ref. No. 519, Management of Multiple Casualty Incidents and Ref. No. 519.5, MCI Field Decontamination Guidelines, as appropriate (depending on the number of victims)
7. Patient destination when hospital/bed availability is known

IV. Role of the MAC/Base Hospital:

- A. Contact the Poison Control Center at (800) 222-1222 (Chemical) or the Department of Public Health, Radiation Management Division (213) 974-1234 (Radiation) and provide them with a brief description of the incident and the hazardous materials involved and request treatment and decontamination information. In particular, determine if any special precautions must be taken to avoid contamination of health care workers, transport unit, hospital, other bystanders, etc.
- B. Notify the Med Com of any precautions that should be taken at scene.
- C. Identify and poll the appropriate Hospital Response Group(s) to determine bed availability (MAC function).
- D. Provide hospital/bed availability of hospitals with decontamination teams to

the Med Com.

- E. Notify receiving hospitals of incoming patients and inform them of any relevant treatment or precaution information that has been obtained from the Poison Control Center or other reliable source.

CROSS REFERENCES

Prehospital Care Manual:

Ref. No. 519, **Management of Multiple Casualty Incidents**

Ref. No. 519.1, **MCI-Definitions**

Ref. No. 519.4, **MCI Field Decontamination Guidelines**

Ref. No. 805, **California Poison Control System**

Ref. No. 807.1, **Prehospital HazMat Incident Flowchart**

Ref. No. 817, **Regional Mobile Response Team**