Emergency Operations Centers (EOCs) serve as the center(s) for incident management. One or both EOCs could be activated based on the type and needs of the incident.

Locations:
- North EOC: Medical Center North Round Wing S-2433 Phone (322-4362) FAX (322-8800)
- South EOC: Monroe Carell Jr. Children’s Hospital at Vanderbilt (Children’s Hospital) Wadlington Conference Room 2202 Phone (936-6154) FAX (936-6162)

Bed Management Coordination Centers for nursing units to report bed status

Locations:
- VUH Admitting Office: VUH Room 1107 FAX (343-9962) Phone (343-1510)
- Children's Hospital Admitting Office: VCH Room 1023 FAX (936-4337) Phone (936-4334)

Labor Pool for managers/supervisors/charge nurses to send staff to be re-assigned during emergency operations.

Location: Children’s Hospital Theatre: Room 2210 Phone (936-7665) (936-POOL)
**Discharge Coordination Centers** to expedite a surge of patients for discharge
Locations: VUH Medical Center East 2nd Floor Lobby Phone (936-3456)
Children's Hospital 2nd Floor Performance Area (Butterfly Theatre) Phone (936-4447)

**Physician Command Posts** to coordinate and deploy physician resources based on the needs of the incident.
Locations: **Medicine, Surgery, and Critical Care Physician Command Post**
          VUH 8108-09 Phone: VUH 8108: 343-5390
          Phone: VUH 8109: 343-5859
**Pediatric Physician Command Post**
          Children’s Hospital Board Room (Room 2220) Phone: 936-6361
**Emergency Medicine Command Post**
          VUH 1472 Phone: 343-6041
**VUH Physician Labor Pool**
          VUH 8112-14 (Paine Medical Library) Phone: 343-5419
Visitor Coordination Centers where visitors/family members of victims of the incident are directed to obtain information about their loved one.
Locations: VUH 1st Floor Lobby Phone (322-7746) Hours of Operation 7am-9pm
Children's Hospital 2nd Floor Room 2104 Phone (936-4576) Hours of Operation 7am-9pm

Media Coordination Center where the news media gather to obtain information
Location: Oxford House Suite 108 Phone (322-4747)
# Emergency First Response

**For Medical Emergencies in Inpatient and Outpatient Areas on the VUMC Campus**

Call 1-1111 (from a house phone)

**For Medical Emergencies in All Other Buildings**

Call 911

**For Fire**

Activate Nearest Alarm Pull Station

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrator on Call (AOC) (pager)</td>
<td>835-1018</td>
</tr>
<tr>
<td>Environmental Health &amp; Safety (pager)</td>
<td>835-4965</td>
</tr>
<tr>
<td>Plant Services</td>
<td>322-2041</td>
</tr>
<tr>
<td>Environmental Services</td>
<td>343-1000</td>
</tr>
<tr>
<td>Risk &amp; Insurance Management</td>
<td>936-0660</td>
</tr>
<tr>
<td>VPD</td>
<td>911 from any house phone</td>
</tr>
<tr>
<td>Clinical Engineering</td>
<td>322-3440 or Operator</td>
</tr>
<tr>
<td>Office of Emergency Preparedness</td>
<td>322-0242</td>
</tr>
<tr>
<td>Poison Control Hotline</td>
<td>936-2034</td>
</tr>
</tbody>
</table>
### Area Specific Information

<table>
<thead>
<tr>
<th>Duties</th>
<th>Person Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Triage Patients for Discharge</td>
<td></td>
</tr>
<tr>
<td>Contact EOC with Bed Status</td>
<td></td>
</tr>
<tr>
<td>Conduct bed census and FAX Unit Status Report to 343-9962</td>
<td></td>
</tr>
<tr>
<td>Activate Staff Stand-By or Recall</td>
<td></td>
</tr>
<tr>
<td>Assess Supplies/Resources</td>
<td></td>
</tr>
</tbody>
</table>
Mass Casualty Plan Activation

1. Staff is required to remain on duty until released by the supervisor or Incident Commander.
2. Obtain work area Hospital Incident Command System (HICS) Job Action Sheet (available at https://www.mc.vanderbilt.edu/ep/)
3. Put on Hospital Incident Command System (HICS) vest if appropriate.
4. Assess equipment and supplies in your work area.
5. Conduct bed census and FAX Unit Status Report to Bed Management. VUH: 343-9962  Children’s Hospital: 936-4337
6. Triage patients for possible discharge and complete the Discharge Center Information Form (MC 4842 available on edocs).
7. DO NOT discharge patients to the Discharge Coordination Center until directed to do so by the designated Emergency Operations Center (EOC).
8. When the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
9. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff person is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
10. Send non-utilized staff to the Labor Pool (VCH Theatre) unless unit/department specific sub plan outlines another assignment.
11. Provide administrative/leadership staff with unit/department updates on an hourly basis as necessary.
12. Assure all visitors have appropriate identification.
13. Provide visitors with incident updates as needed.
14. Secure unit/department as necessary.
15. Wait for announcement that the situation is cancelled before returning to normal operations.

FYI: VUMC Decontamination Center in the TVC Circle Drive may be in operation.

Mass Casualty Plan Activation
## Area Specific Information

<table>
<thead>
<tr>
<th>Duties</th>
<th>Person Responsible</th>
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<tbody>
<tr>
<td>Chemical</td>
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<tr>
<td>Biologic</td>
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<td>Radiologic</td>
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<tr>
<td>Nuclear</td>
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<tr>
<td>Explosive</td>
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</tr>
</tbody>
</table>
Mass Casualty CBRNE Incident

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Staff is required to remain on duty until released by their supervisor or Incident Commander.
2. Obtain work area Hospital Incident Command System (HICS) Job Action Sheet (available at http://www.mc.vanderbilt.edu/ep/)
3. Put on Hospital Incident Command System (HICS) vest if appropriate.
4. Assess equipment and supplies in your work area.
5. Conduct bed census and FAX Unit Status Report to 343-9962.
6. Triage patients for possible discharge and complete the Discharge Center Information Form (MC 4842 available on edocs).
7. DO NOT discharge patients to the Discharge Coordination Center until directed to do so by the designated Emergency Operations Center (EOC).
8. When the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
9. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff person is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
10. Send non-utilized staff to the Labor Pool (VCH Theatre) unless unit/department specific sub plan outlines another assignment.
11. Provide administrative/leadership staff with unit/department updates on an hourly basis as necessary.
12. Assure all visitors have appropriate identification.
13. Provide visitors with incident updates as needed.
14. Secure unit/department as necessary.
15. Wait for announcement that the situation is cancelled before returning to normal operations.

FYI: VUMC Decontamination Center in the TVC Circle Drive may be in operation.
Area Specific Information
Internal Disaster (Look for Situation Tab in this Emergency Operations Quick Reference Guide)

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Respond to Orange Alert for (Situation)
2. Immediately respond to announced situation to protect patients, visitors, and staff.
3. All staff are required to remain on duty until released by supervisor or the Incident Commander.
4. Prepare to activate unit/department sub-plan.
5. Do not activate evacuation plans until directed by the designated Emergency Operations Center or Public Safety Official unless life threatening conditions exist.
6. Instruct staff to refer all press inquiries on any subject to News & Public Affairs (322-4747) or to the AOC/AC (835-1018).
7. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
8. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
9. Send non-utilized staff to the Labor Pool (VCH Theatre) unless unit/department specific sub-plan outlines another assignment.
10. Wait for announcement that the situation is cancelled before returning to normal operations.
12. Call Risk Management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Internal Disaster
Evacuation

Area Specific Information

Duties

Place Medical Record with Patient

Conduct Patient/Staff Head Count at Evacuation Destination

Conduct Final Unit Search

Evacuation Destination
Evacuation

Refer to the *How To* section of the online *Safety & Emergency Operations Manual* (http://www.mc.vanderbilt.edu/ep/)

1. Move any patient or visitor from immediate danger. Do not wait for instruction.
2. Prepare to evacuate those who are not in immediate danger. Do not move patients until ordered to do so.
3. Coordinate evacuation process with bed management.
   - VUH Admitting Office: Phone (343-1510)
   - Children's Hospital Admitting Office: Phone (936-4334)
4. If evacuation is imminent, complete HICS forms 255 and 260 available at http://www.mc.vanderbilt.edu/ep
5. Evacuation priority will be:
   a) Ambulatory Patients
   b) Non-Ambulatory Patients
   c) Helpless/Critical Patients
   d) Faculty and Staff
6. Place medical records with patients.
7. Designate evacuated patient rooms by marking the corridor side of the patient room door with a large “X” using visible tape or marker.
8. All facilities will be evacuated from the top floor down unless immediate danger dictates otherwise.
9. Do not use elevators unless directed to do so.
10. Use visitors to assist in evacuation.
11. Conduct patient/staff head count at evacuation destination.
12. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
13. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
14. Wait for the announcement that the situation is cancelled before returning to normal operations.
15. Complete the Emergency Operations Critique Form.
Area Specific Information

Locations of Fire Pull Stations

Locations of Fire Extinguishers

Locations of Medical Gas Zone Valves

Pull the pin in the neck of the extinguisher.
Aim the spray nozzle at the base of the fire. Stand 8-10 feet away from the fire.
Squeeze the handles together.
Sweep the spray nozzle from side to side, covering the fire.
Fire

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Remain calm and rescue anyone in immediate danger.
2. Activate the nearest fire alarm pull station and alert any co-workers in the immediate vicinity of the fire.
3. Confine the fire by closing all doors.
4. Extinguish the fire by smothering with blanket or using a fire extinguisher. Evacuate if there is immediate danger or when ordered by a firefighter or supervisor.
5. Never wait for instruction to move patients in immediate danger.
6. Unit charge nurse is responsible for shutting off the medical gas zone valve, if fire involves or threatens the medical gas system.
7. Staff in areas not directly involved in the fire should: close all doors, clear corridors, minimize telephone traffic, prepare for evacuation, and prepare area to receive patients from evacuated areas.
8. Contact AOC/AC (835-1018) or the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
9. Wait for announcement that the situation is cancelled before returning to normal operations.
11. Call Risk Management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for Fire is: Red Alert
Earthquake

Area Specific Information


Earthquake

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Remain calm.
2. Remain inside and away from windows and doors.
3. Get under any type of furniture. Sit down and cover your head and neck.
4. Prepare to evacuate patients in immediate danger.
5. Assess work area for welfare of patients, visitors, faculty, staff, property, and equipment damages, and utility operations.
6. Contact AOC/AC (835-1018) for immediate assistance.
7. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
8. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system if electrical power is available.
9. Wait for announcement that the situation is cancelled before returning to normal operations.

Earthquake
Tornado

Area Specific Information

Safe Refuge Areas
Tornado (Also see black Early Warning Weather Alert tab.)

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. When possible, all patients should be moved to interior areas away from exterior walls and windows.
2. Critical patients who cannot be moved should be protected by:
   • Closing window drapes
   • Covering patient with blankets
   • Moving bed so that patients’ heads are turned away from windows
3. Staff and visitors should be moved to interior areas away from exterior walls and windows.
4. Do not send patients or visitors to the basement of the Medical Center.
5. Contact AOC/AC for immediate assistance (835-1018).
6. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
7. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
8. Wait for announcement that the situation is cancelled before returning to normal operations.

Overhead announcement for Potential Tornado threat is: Yellow Alert Standby For Tornado
Overhead announcement for Tornado Plan Activation is: Orange Alert Tornado Warning
Flood (Internal)

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. If this happens:
   • Flooding is observed in your work area.
2. Remain calm.
3. Rescue anyone in immediate danger.
4. Notify Plant Services @ 322-2041 to report the location of the flooding.
5. Move patients in immediate danger to a safe area and send FAX to Bed Management (VUH 343-9962 or Children’s Hospital 936-4337) regarding patients’ new location.
6. Staff must remain on duty until released by their supervisor or the Incident Commander.
7. Prepare to activate unit/department sub plan.

If flooding is severe:
8. Assess for patient evacuation equipment/supply needs and prepare a list of equipment and supplies you will need for patient evacuation.
9. Prepare patients for possible evacuation and complete a Discharge Center Information Form (MC 4842 available on edocs) on each patient.
10. Print essential parts of each patient’s medical record (Emergency Contact Information (area code and phone number), H & P, Problem List, Medication Record, Lab Reports etc.) in preparation for patient evacuation.
11. Ensure each patient has ID and allergy bracelets on an extremity.
12. Ensure each patient has emergency contact information on the front of their chart and on the Discharge Center Information Form (MC 4842 available on edocs) (must include area code and phone number).
13. Do not flush toilet or use tap water, drinking fountain, or ice machine.
14. Assure all water faucets are off.
15. Conserve water for patient use. Bottled water will be distributed by Plant Services.
16. Assure all visitors have appropriate identification and secure unit if necessary.
17. Await instructions from your supervisor or public safety officials before activating the evacuation plan.
18. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
19. Wait for notification the situation is cancelled before returning to normal operations.
21. Call Risk Management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead Announcement for Potential Internal Flood threat is: Yellow Alert for Internal Flood
Overhead Announcement for Internal Flood Plan Activation is: Orange Alert for Internal Flood
1. If this happens: Severe flooding occurs in downtown Nashville and surrounding areas.
2. Remain calm.
3. Staff must remain on duty until released by their supervisor or the Incident Commander.
4. Assess supply and staffing levels in your work area.
5. Conduct bed census and FAX Unit Status Report to 343-9962 for VUH or 936-4337 for Children’s Hospital.
6. Assess for patient evacuation equipment needs and prepare a list of equipment and supplies you will need for patient evacuation.
7. Prepare patients for possible evacuation and complete a Discharge Center Information Form (MC 4842 available on edocs) on each patient.
8. Print essential parts of each patient’s medical record (Emergency Contact Information (area code and phone number), H & P, Problem List, Medication Record, Lab Reports etc.) in preparation for patient evacuation.
9. Ensure each patient has ID and allergy bracelets on an extremity.
10. Ensure each patient has emergency contact information on the front of their chart and on the Discharge Center Information Form (MC 4842 available on edocs) (must include area code and phone number).
11. Do not flush toilet or use tap water, drinking fountain, or ice machine.
12. Assure all water faucets are turned off.
13. Conserve water for patient use. Bottled water will be distributed by Plant Services.
15. Assess the need for sheltering those on the unit.
16. Assure all visitors have appropriate identification and secure unit if necessary.
17. Await instructions from your supervisor or public safety officials before activating the evacuation plan.
18. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
19. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
20. Wait for notification the situation is cancelled before returning to normal operations.
22. Call Risk Management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead Announcement for Potential External Flood threat is: **Yellow Alert for External Flood**

Overhead Announcement for External Flood Plan Activation is: **Orange Alert for External Flood**
Area Specific Information


Inclement Weather

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. If this happens: inclement weather other than a tornado (i.e. high winds, severe thunderstorm, flash flood, winter weather) disrupts normal operations.
   • Staff may need to remain on site due to personal safety and staffing needs. Accommodations may be provided under the direction of the AOC/AC when the Inclement Weather Plan is activated.
   • When the plan is activated, staff can call Admitting (343-8193) to register for inclement weather accommodations.

2. Severe Thunderstorm Warning
   • An outdoor severe thunderstorm warning system sounds to warn faculty, staff, visitors and students, followed by an announcement of a SEVERE THUNDERSTORM WARNING. Take shelter immediately in a building or vehicle.

3. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).

4. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.

5. Complete the electronic Emergency Operations Critique Form.

Overhead announcement for Potential Inclement Weather is: Yellow Alert Stand-By For Inclement Weather
Overhead announcement for Inclement Weather Plan is: Orange Alert Inclement Weather
## Area Specific Information

### Duties

<table>
<thead>
<tr>
<th>Duties</th>
<th>Person Responsible</th>
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</thead>
<tbody>
<tr>
<td>Do not attempt to negotiate, apprehend, or intervene with the suspect</td>
<td></td>
</tr>
<tr>
<td>Remove yourself from the situation immediately if possible</td>
<td></td>
</tr>
</tbody>
</table>

**Call VPD at 911 (from a house phone). Tell them:**

- Your Location
- Location of suspect(s)
- Description of suspect(s)
- Types of weapons
- Description of event / Additional information related to the incident if known

**Identify and note possible witnesses to the incident and refer them to VPD**
Code Silver (Active Shooter)

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. If this happens:
   • A violent assault and a gun is involved
   • Someone firing gunshots
   • Code Silver and (Location) is announced over the public address system; “Location” is the site of the Code Silver
2. Do not attempt to negotiate, apprehend, or intervene with the suspect
3. Remove yourself from the situation immediately if possible
4. Call the Vanderbilt Police Department (VPD) or applicable police department (off site clinics) at 911. Tell them:
   • Your location
   • Location of suspect(s)
   • Description of suspect(s)
   • Types of weapon(s)
   • Description of event / Additional information related to the incident if known
   • Number of victims and any known injuries
5. Isolate the suspect from patients, visitors, and staff if possible by adding distance and/or a barrier

6. When possible, secure patient care areas by closing, locking and/or barricading all doors leading to the Code Silver area. Use available items such as file cabinets and furniture to block access to suspect if necessary.
7. When possible, close blinds, block windows, turn off radios and cell phones, and keep quiet to reduce your vulnerability.
8. Await instructions from VPD.
9. Identify and note possible witnesses to the incident and refer to VPD.
10. Continue response until you hear a Code Silver is cancelled announcement over the Medical Center public address system.
11. Wait for announcement that situation is cancelled before returning to normal operations.
13. Call Risk Management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for an active shooter is: Code Silver

NOTE: An announcement for a CODE SILVER must be authorized by VPD.
Area Specific Information

<table>
<thead>
<tr>
<th>Duties</th>
<th>Person Responsible</th>
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</table>

Call VPD at 911 (from a house phone) and arrange to meet with an officer away from the person suspected of having a weapon.

Tell them:
- Your Location
- Location of suspect(s)
- Description of suspect(s)
- Types of weapons
- Threats – whether threats have been made and whether weapon is being used in a threatening manner
- Description of event / circumstances that led to the belief that a firearm or other weapon may be present
- Number of victims and any known injuries

Do not attempt to negotiate, apprehend, or intervene with the suspect
Person with Firearm or Dangerous Weapon

Refer to the *How To* section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. If this happens:
   • You receive information that a firearm or other dangerous weapon may be present in VUMC, follow VUMC Policy SA 30-10.04

2. Call the Vanderbilt Police Department (VPD) or applicable police department (off site clinics) at 911, and arrange to meet with an officer away from the person suspected of having a weapon. Advise the police of the following:
   • Your location
   • Location of suspect(s)
   • Description of suspect(s)
   • Types of weapon(s)
   • Threats – whether threats have been made and whether weapon is being used in a threatening manner
   • Description of event / circumstances that led to the belief that a firearm or other weapon may be present
   • Number of victims and any known injuries

3. Do not attempt to negotiate, apprehend, or intervene with the suspect.

4. Identify a non-public area where officers may speak with the individual away from other patients, visitors, and staff.

5. Call Risk Management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
Area Specific Information

If a forensic patient is admitted to your area, the Charge Nurse must immediately notify VPD.
Security Emergency

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. If you encounter:
   • A combative patient
   • Someone making threats
   • A suspicious person
   • A disruptive, hostile or threatening individual
   • A missing patient (See purple Missing Person/Abduction tab.)
   • Harassing or threatening phone calls
2. Call the Vanderbilt Police Department (VPD) or applicable police department (off site clinics) at 911.
3. Tell them:
   • Your location
   • Description of subjects
   • Description of events
   • Types of weapons and threats
4. Stay on the phone until instructed otherwise.
5. Prepare to activate unit/department sub plan.
6. Contact AOC/AC for immediate assistance (835-1018)
7. If the Emergency Operations Center (EOC) is activated, contact the designated EOC if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
8. Terminate response when directed by VPD.
9. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
Bomb Threat

Date ______________________________ Time Call Received ________________________________

Caller ID Male ☐ Female ☐ Phone Number displayed if using D-Term Phone ______________________

Approximate Age ________________________________________________________________

Voice Characteristics __________________________________________________________________________________

Sounds Believable______________________________________________________________________________

Background Noise_________________________________________________________________________________

Bomb Information to Ask Caller

Time Scheduled to Explode________________________________________________________________________

Location of Bomb _________________________________________________________________________________

Type of Bomb ___________________________________________________________________________________

Number of Bombs _________________________________________________________________________________
Bomb Threat (Code Black)

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Do NOT hang up the phone (EVEN IF the caller hangs up).
2. Make detailed notes. (See the form above.)
3. Have someone contact VPD (911) on another phone. Off-site clinics should report the incident to local police at 911.
4. Remain calm.
5. Note the time.
6. Report the call to AOC/AC (835-1018)
7. If the caller states the bomb is in your area, scan the area for suspicious packages or devices.
8. Do not move or handle suspicious packages or devices.
9. Turn off cell phones, pagers, and radios if the caller states the bomb is in your work area.
10. On duty staff members assigned to the unit/area where the bomb is reported are to report to their unit/area for further instructions.
11. Review the unit/area evacuation plan.
12. Prepare to evacuate the unit/area, but wait until directed.
13. Await further instructions from your supervisor.
14. When the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
15. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
16. Terminate the response when directed by VPD, or when an overhead announcement is made that the situation is cancelled, before returning to normal operations.
17. Call Risk Management (936-0660) to report the incident and document the incident using the online reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for a bomb threat is CODE BLACK
NOTE: An announcement for a CODE BLACK must be authorized by VPD.
Suspicious Caller

Date ______________________________ Time Call Received ________________________________

Caller ID  Male ☐ Female ☐ Phone Number displayed if using D-Term Phone ______________________

Approximate Age

Voice Characteristics

Sounds Believable

Background Noise
Suspicious Caller

Refer to the *How To* section of the online **Safety & Emergency Operations Manual** (http://www.mc.vanderbilt.edu/ep/)

1. In the event you receive a suspicious phone call, collect and report the following information:
   - Take careful note of what is being asked
   - Request the identity of the caller
   - Request with whom the caller is affiliated
   - Note the caller’s phone number
   - Note any specific information about the call (background noise, voice characteristics)

2. DO NOT hang up the phone (even if the caller hangs up).

3. Remain calm.

4. Make detailed notes as they are outlined above.

5. Have someone contact VPD (911) from another phone. Offsite clinics should report the incident to local police at 911.

6. Note the time of the call.

7. Report the call to the AOC/AC (835-1018)

8. Terminate the response when directed by VPD.
Suspicious Letter or Package

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. If the suspicious letter or package has not been opened:
   • Do not open, shake or disturb the contents. Do not pass to others or transport contents out of the area.
   • Call VPD (911) and provide the location of the package, a description including size, and your location and contact number. Offsite clinics should report the incident to local police at 911.

2. If the suspicious letter or package has been opened or is leaking:
   • Do not shake, disturb or empty its contents. Do not pass the letter or note to others or transport out of area.
   • Do not try to clean up powders or fluids. Place the envelope or package in a plastic bag or some other type of container to contain leakage of contents.
   • If nothing is available, cover the item and leave it undisturbed. Turn off fans, close door, or section off the area to minimize exposure to others.
   • Wash your hands with soap and water, and move to an area that minimizes your exposure. Call VPD (911) and provide the location of the package, a description including size, and your location and contact number. Remain in the area and restrict others from entering until the arrival of VPD.

3. Terminate response when directed by VPD.

4. Complete a “First Report of Injury” report and contact Occupational Health (936-0955) or, during off hours, call the Emergency Department (322-0145) if exposure occurred.

5. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
**Area Specific Information**

<table>
<thead>
<tr>
<th>Duties</th>
<th>Person Responsible</th>
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<tr>
<td><strong>Notify Security</strong></td>
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<tr>
<td><strong>Clear Nonessential Persons From Area</strong></td>
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<tr>
<td><strong>Conduct Head Count At Assembly Point</strong></td>
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<tr>
<td><strong>Keep Possible Witnesses In Area</strong></td>
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</tbody>
</table>
Hostage Crisis

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Notify VPD immediately (911). Off-site clinics should report the incident to local police (911).
2. Tell them:
   • Your location
   • Description of subjects
   • Description of events
   • Types of weapons and threat
3. Clear non-essential persons from surrounding areas as soon as possible.
4. DO NOT act upon requests from hostage taker until VPD arrives, unless dangerous circumstances are present.
5. Keep possible witnesses in the area and identify them to VPD.
6. Prepare to activate unit/department sub plan.
7. Contact AOC/AC (835-1018)
8. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
9. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
10. Terminate response when directed to do so by VPD.
11. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
Facility Lockdown

Area Specific Information
Facility Lockdown

Refer to the *How To* section of the online *Safety & Emergency Operations Manual* (http://www.mc.vanderbilt.edu/ep/)

PENDING
Area Specific Information
Medical Air Failure

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

Patients on normal oxygen delivery systems will not be affected.

Ventilators will alarm but continue to operate at an oxygen concentration of 100%.

1. Notify • Respiratory Care (Adult 835-5978) / (Pediatric 835-5955)
   • Plant Services (322-2041)

2. Confirm Zone Valve position. Consult Unit Charge Nurse if closed (Do NOT open if ‘Tagged Out’).

3. Closely monitor and support patients during the interim period. Manually ventilate any patient on a ventilator that is not working. Notify Respiratory Care.

4. Be prepared to relocate patients using a horizontal route.

5. Prepare to activate unit/department sub plan.

6. Notify the AOC/AC (835-1018) if additional help is required.

7. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).

8. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.

9. Wait for announcement that situation is cancelled before returning to normal operations.


11. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for Potential Medical Air Problem is: Yellow Alert Stand-By For Medical Air Failure

Overhead announcement for Medical Air Failure is: Orange Alert Medical Air
Nitrous Oxide Failure

Area Specific Information
Nitrous Oxide Failure

Refer to the *How To* section of the online Safety & Emergency Operations Manual ([http://www.mc.vanderbilt.edu/ep/](http://www.mc.vanderbilt.edu/ep/))

1. Notify the following areas about the situation and request additional cylinders, if necessary
   • Anesthesiology 343-6770
   • Emergency Department 322-0160
   • Delivery Room I and II 322-5139 and 322-5140
   • Operative Services 322-0770
   • Plant Services 322-2041
   • VCH Anesthesia 936-0023
   • VUH Anesthesia (MOR) 343-2073

2. Closely monitor and support patients.

3. Ensure that all patients are secure and comfortable.

4. If possible, transfer patients to another room on the same unit where the service is not altered.

5. Notify AOC/AC (835-1018) if additional help is required.

6. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).

7. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.

8. Wait for announcement that situation is cancelled before returning to normal operations.


10. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ [http://veritas.mc.vanderbilt.edu](http://veritas.mc.vanderbilt.edu)
Vacuum System Failure

Area Specific Information

Location of Zone Valve
Vacuum System Failure

Refer to the *How To* section of the online *Safety & Emergency Operations Manual* (http://www.mc.vanderbilt.edu/ep/)

1. Contact Plant Services (322-2041) and your service center to report failure.
2. Confirm Zone Valve position. Consult Unit Charge Nurse if closed. (Do NOT open if ‘Tagged Out’)
3. Closely monitor and support patients during the interim period. Any patient on suction requiring immediate action should be manually aspirated until portable pumps arrive.
4. Obtain portable vacuum pumps from the Service Center.
5. Prepare to activate unit/department sub plan.
6. Notify AOC/AC (835-1018) if additional help is required.
7. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
8. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
9. Wait for announcement that situation is cancelled before returning to normal operations.
11. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for Potential Vacuum Problem is: **Yellow Alert Stand-By For Vacuum**
Overhead announcement for Vacuum Failure is: **Orange Alert Vacuum**
Area Specific Information

Location of Flashlights

[Blank lines]
Electrical Failure

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Manually support ventilator patients.
2. Check all electronically operated patient care equipment. Use red emergency outlets for vital or critical functions only. Confirm proper operation of battery operated equipment.
3. Emergency outlets and lights require 10 seconds for activation.
4. Report outage to Plant Services (322-2041)
5. If emergency power is not available:
   • Call Plant Services (322-2041)
   • Manually support ventilator patients
   • Use flashlights as necessary
   • Manually regulate patients dependent on vital equipment
6. Prepare to activate unit/department sub plan.
7. Notify AOC/AC (835-1018) if additional help is required.
8. Reassure patients.
9. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
10. Wait for announcement that situation is cancelled before returning to normal operations.
12. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for Potential Electrical Problem is: Yellow Alert Stand-By For Electricity
Overhead announcement for Electrical Failure is: Orange Alert Electricity
Area Specific Information

Conserve Water

Turn Off Faucets

Do Not Flush Toilets, Do Not Use Tap Water, Drinking Fountain, or Ice Machine
Water Failure

Refer to the *How To* section of the online Safety & Emergency Operations Manual ([http://www.mc.vanderbilt.edu/ep/](http://www.mc.vanderbilt.edu/ep/))

1. Do not flush toilet or use tap water, drinking fountain, or ice machine.
2. Assure all faucets are turned off.
3. Obtain waterless hand cleaner from Service Center.
4. Conserve water for patient use. Bottled water will be distributed by Plant Services.
5. Call Plant Services (322-2041) if problems are found.
6. Prepare to activate unit/department sub plan.
7. Notify AOC/AC (835-1018) if additional help is required.
8. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
9. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
10. Wait for announcement that situation is cancelled before returning to normal operations.
12. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ [http://veritas.mc.vanderbilt.edu](http://veritas.mc.vanderbilt.edu)

Overhead announcement for Potential Water Problem is: **Yellow Alert Stand-By For Water**
Overhead announcement for Water Failure is: **Orange Alert Water**
Area Specific Information
Critical Fuel Shortage

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

Natural and manmade disasters have the potential for causing an interruption in fuel resources which could impact normal operations at the medical center as well as its offsite clinics. For this reason a Critical Fuel Shortage Plan has been developed to ensure business continuity when this situation is encountered.

The Critical Fuel Shortage Plan is divided into four tiers. The decision for responding to a specific TIER Level or advancing to subsequent TIERS is the responsibility of the VU/VUMC Executive Leadership Team in concert with the Fuel Shortage Emergency Response Team.

TIER 0: No critical fuel shortage exists, normal operations. Focus of this TIER is on preparedness/mitigation activities.

TIER 1: Threat of a critical fuel shortage exists. The focus of this TIER is operational readiness for a potential fuel shortage.

TIER 2: Potential Critical Fuel shortage exists. Yellow alert Stand-By for Fuel Shortage is announced over the public address system and this message is sent via the alphanumeric paging system. Shuttle service may be reduced.

TIER 3: Critical fuel shortage exists. Orange alert Fuel Shortage is announced over the public address system and this message is sent via the alphanumeric paging system. Designated Emergency Operations Center (EOC) is opened and Emergency Operations Plan is activated. Shuttle service is discontinued. Accommodations may be available for faculty and staff.

Wait for announcement that the situation is cancelled before returning to normal operations.

Overhead announcement for Potential Critical Fuel Shortage is: Yellow Alert Stand-By for Fuel Shortage
Overhead announcement for Critical Fuel Shortage is: Orange Alert Fuel Shortage
Steam System Failure

Area Specific Information

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Steam System Failure

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Call Plant Services (322-2041) to report problems.
2. Conserve sterile supplies and linens.
4. Obtain blankets from unit stock and Linen Distribution.
5. Reserve the use of blankets for patients only.
6. Prepare to activate unit/department sub plan.
7. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
8. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
9. Wait for announcement that situation is cancelled before returning to normal operations.
11. Call Risk Management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for Potential Steam Problem is: Yellow Alert Stand-By For Steam
Overhead announcement for Steam Failure is: Orange Alert Steam
Oxygen Failure

Area Specific Information

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Oxygen Failure

Refer to the *How To* section of the online *Safety & Emergency Operations Manual* (http://www.mc.vanderbilt.edu/ep/)

1. Manually support ventilator patients.
2. Notify:
   - Respiratory Care (Adult 835-5978/Pediatric 835-5955)
   - Plant Services (322-2041)
3. Confirm Zone Valve position. Consult Unit Charge Nurse if closed. (Do NOT open if ‘Tagged Out.’)
4. Obtain portable oxygen cylinders from Service Center.
5. Place patients requiring highest concentrations of oxygen on portable oxygen cylinders first.
6. Be prepared to relocate patients.
7. Prepare to activate unit/department sub plan.
8. Notify AOC/AC (835-1018) if additional help is required.
9. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
10. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
11. Wait for announcement that situation is cancelled before returning to normal operations.
13. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for Potential Steam Problem is: **Yellow Alert Stand-By For Oxygen**
Overhead announcement for Steam Failure is: **Orange Alert Oxygen**
Computer System Failure

Refer to the *How To* section of the online *Safety & Emergency Operations Manual* ([http://www.mc.vanderbilt.edu/ep/](http://www.mc.vanderbilt.edu/ep/))

1. Notify the VUMC Help Desk (343-4357)
2. Stand by for further instructions.
3. Be prepared to provide information required to diagnose the problem, such as your name, User ID, the workstation and/or printer ID, the name of the application in which you had a problem, etc.
4. You may be told to use downtime procedures for a brief period while support personnel determine if system downtime is needed. In such cases, you may try to use another device if the problem seems to be isolated to one workstation or printer.
5. Do not use any computerized systems until directed to do so.
6. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
7. Wait for announcement that situation is cancelled before returning to normal operations.
9. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ [http://veritas.mc.vanderbilt.edu](http://veritas.mc.vanderbilt.edu)

Overhead announcement for Potential Computer System Problem is: **Yellow Alert Stand-By For Computer System**

Overhead announcement for Computer System Failure is: **Orange Alert Computer System Failure**
### Area Specific Information

<table>
<thead>
<tr>
<th>Duties</th>
<th>Person Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standby for further instructions</td>
<td></td>
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<tr>
<td>Check for messages about the failure in STAR Panel</td>
<td></td>
</tr>
<tr>
<td>Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system.</td>
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</tbody>
</table>
Laboratory Computer System Failure

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Standby for further instructions.

2. Emergency Departments and Critical Care Areas receive direct phone notification about the system failure from the Laboratory Downtime Call Center.

3. Check the following communication systems for additional information regarding the outage:
   
   • Messages in STAR Panel
   • Messages via Vanderbilt e-mail system (assign a staff member to check the computer in your work area on an hourly basis to obtain updates via the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available).

4. STAT lab results during the outage are called to the ordering departments.

5. Notify the laboratory downtime call center @ 322-1164 for assistance as needed.

6. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).

7. Wait for announcement that situation is cancelled before returning to normal operations.

8. Complete the electronic Emergency Operations Critique Form

9. Call Risk Management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu/

Overhead announcement for Potential Laboratory Computer System Problem is:

Yellow Alert Stand-By For Laboratory Computer System

Overhead announcement for Laboratory Computer System Failure is:

Orange Alert Computer Laboratory System Failure
**Area Specific Information**

**Location Of Red Phone**

<table>
<thead>
<tr>
<th>Frequently Called Area</th>
<th>RED Phone #</th>
<th>Regular Phone #</th>
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</table>
Phone System Failure *(Also see black tab Emergency Radio System)*

Refer to the *How To* section of the online Safety & Emergency Operations Manual ([http://www.mc.vanderbilt.edu/ep/](http://www.mc.vanderbilt.edu/ep/))

1. Determine if nearby phones are operational. Report phone outage to telephone repair @ 421-1611.
2. Confirm your area’s “RED” phone is working, or use a cell phone if possible.
3. The “RED” phone, overhead public address and pager systems are to be used only for URGENT patient care issues. Limit phone use.
4. Go to [http://its.vanderbilt.edu/voice/redphone_dir](http://its.vanderbilt.edu/voice/redphone_dir) to obtain the “RED” Phone Directory. If the “RED” phone you are trying to reach is inoperable, try the regular phone number for that area.
5. Emergency area phone numbers
   - Operator, Overhead  6-9999
   - STAT Calls  6-9111
   - Security  321-2222
   - “RED” Phone #  Regular Telephone #
   - 0
   - 1-1111
   - 2-2745
6. Activate unit/department sub plan.
7. Use beeper system for text paging as an alternate way to communicate.
8. Notify AOC/AC (835-1018) for immediate assistance.
9. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
10. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
11. Wait for announcement that situation is cancelled before returning to normal operations.
13. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system at [http://veritas.mc.vanderbilt.edu](http://veritas.mc.vanderbilt.edu)

Overhead announcement for Potential Phone Problem is: **Yellow Alert Stand-By For Phone**
Overhead announcement for Phone System Failure is: **Orange Alert Phone**
Beeper System Failure

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Use phone, mobile phone or cell phone.

2. Use overhead paging for urgent issues.

3. Call 421-1111 for STAT pages
   - Departments with Emergency On-call pager responsibilities implement their department sub plans.
   - Tell hospital operator your alternate form of communication.

4. If the Emergency Operations Plan is activated, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).

5. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.

6. Wait for announcement that situation is cancelled before returning to normal operations.

7. Complete the electronic Emergency Operations Critique Form.

8. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for Potential Beeper System Failure is: Yellow Alert Standby For Beeper System
Overhead announcement for Beeper System Failure is: Orange Alert Beeper System
Area Specific Information

Isolation Room Numbers
Isolation Room Failure

Refer to the *How To* section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

1. Ensure door to room and ante-room are fully closed.
2. Contact Plant Services (322-2041).
3. Restrict access to immediate area.
4. Install portable HEPA air unit from Service Center.
5. Contact Admitting (343-0179) to assist in relocation of patient.
6. Notify Infection Control (936-0725) (after hours 835-1205)
7. Prepare to activate unit/department sub plan.
8. Notify AOC/AC (835-1018) if additional help is required.
9. Terminate response when directed by Plant Services (322-2041)
10. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
Immediate First Aid

- Wash skin surfaces immediately and thoroughly with soap and water.
- Flush mucous membranes of the eye, mouth, or nose immediately and thoroughly with water for 10 - 15 minutes. Remove contact lenses.
- DO NOT use bleach as a skin disinfectant.

Reporting – Complete a “First Report of Work Injury”
This report must be taken with the employee to the Occupational Health Clinic or mailed directly to Office of Risk and Insurance Management Suite # 610 Oxford House.

Important
Make sure the exposed employee goes to Occupational Health or the ED, regardless of the source patient HIV results.

Refer to Exposure Control Policy SA 60-10.01
**Blood/Body Fluid Spill**

Refer to the *How To* section of the online *Safety & Emergency Operations Manual* ([http://www.mc.vanderbilt.edu/ep/](http://www.mc.vanderbilt.edu/ep/)).

Refer to VUMC policy SA 60-10.01 Exposure Control Plan

1. Wear the appropriate personal protective equipment.
   
   **DO NOT PICK UP BROKEN GLASS WITH YOUR HANDS!**

2. Blot blood with an absorbent material.

3. Discard blood and spill kit in a biohazard bag.

4. Clean spill area with an approved disinfectant.

5. Prepare to activate unit/department sub plan.

6. If necessary isolate area and contact Environmental Services (343-1000)

7. Notify AOC/AC (835-1018) if additional help is required.

8. Terminate response when clean-up is complete, or, for large spills, the Environmental Services Supervisor on duty directs you to terminate response.

9. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ [http://veritas.mc.vanderbilt.edu](http://veritas.mc.vanderbilt.edu)

10. Complete a “First Report of Injury” report and contact Occupational Health (936-0955) or, during off hours, the Emergency Department (322-0145) if exposure occurred.
Chemical Spill

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

Refer to policy SA 20-10.02 Hazardous Material Spill

1. Evacuate anyone in immediate danger.
2. Isolate the area, closing doors as you leave.
3. Notify the following.
   - VPD (911)
   - On-Call Safety Officer (835-4965)
   - Plant Services (322-2041)
4. Keep people away from the spill until VPD arrives.
5. Obtain MSDS on chemical, if known.
   Find MSDS information on the Internet at http://www.safety.vanderbilt.edu
6. Prepare to activate unit/department sub plan.
7. Notify AOC/AC (835-1018) if additional help is required.
8. Terminate response when directed by On-Call Safety Officer (835-4965)
9. Complete a “First Report of Injury” report and contact Occupational Health (936-0955) or, during off hours, the Emergency Department (322-0145) if exposure occurred.
10. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
Area Specific Information

Location of spill kit
Chemotherapeutic Spill

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

Refer to policy CL 30-06.09 Cytotoxic (Chemotherapy) Administration and Management

1. Remove patient, family, visitors and staff from immediate area.

2. Wear the appropriate personal protective equipment.
   **DO NOT PICK UP BROKEN GLASS WITH YOUR HANDS!**

3. Use appropriate spill kit.

4. Small spills less than 5 ml.
   - Wear personal protective equipment
   - Wipe with absorbent material
   - Place in proper disposal bag

5. Large spills greater than 5 ml.
   - Mark area to be cleaned and prevent others from entering
   - Notify Pharmacy (322-0703) and obtain spill kit
   - Follow instructions on spill kit for clean-up
   - Notify On-Call Safety Officer (835-4965)

6. Place waste from clean-up of chemo spills in chemotherapeutic waste containers.

7. Complete the spill documentation form.

8. Activate unit/department sub plan.

9. Notify AOC/AC (835-1018) if additional help is required.

10. Terminate response when area clean-up is complete, or, for large spills, when the On-Call Safety Officer (835-4965) directs you.

11. Complete a “First Report of Injury” report and contact Occupational Health (936-0955) or, during off hours, the Emergency Department (322-0145) if exposure occurred.

12. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
Radioactive Material Spill

Refer to the *How To* section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

Refer to policy SA 20-10.02 Hazardous Material Spill

1. Confine the spill.
2. Isolate area, closing doors as you leave.
3. Prevent others from entering the area.
4. Quarantine all staff involved in spill.
5. Notify:
   • VPD (911)
   • Environmental Health & Safety (322-2057)
   • On-call Safety Officer (835-4965)
6. Only trained radiation workers should clean the area.
7. Notify AOC/AC (835-1018) if additional help is required.
8. Terminate response when the On-Call Safety Officer (835-4965) directs you.
9. Complete a “First Report of Injury” report and contact Occupational Health (936-0955) or, during off hours, the Emergency Department (322-0145) if exposure occurred.
10. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
Mercury Spill

Refer to the *How To* section of the online *Safety & Emergency Operations Manual* ([http://www.mc.vanderbilt.edu/ep/](http://www.mc.vanderbilt.edu/ep/))

Refer to policy SA 20-10.01 Mercury Safety

1. Report all mercury spills, no matter how small, to:
   - On-Call Safety Officer (835-4965)
   - VPD (911)

2. Only trained staff should clean up a mercury spill using the appropriate materials.

3. Evacuate the immediate area and isolate the spill.

4. Notify AOC/AC (835-1018) if additional help is required.

5. Terminate response when you are directed by On-Call Safety Officer (835-4965)

6. Complete a “First Report of Injury” report and contact Occupational Health (936-0955) or, during off hours, the Emergency Department (322-0145) if exposure occurred.

7. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
Pneumatic Tube Contamination/Failure

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

Pneumatic Tube Contamination

1. Contain spill at receiving station.
2. Contact Plant Services (322-2041)
3. Do not use the tube system until clean-up is complete.
4. Identify type of spill and initiate appropriate cleanup. Clean spill with proper spill kit and procedure.
5. Wear necessary personal protective equipment.
6. Prepare to activate unit/department sub plan.
7. Notify AOC/AC (835-1018) if additional help is required.
8. Wait for announcement on the LED display that the situation is cancelled before returning to normal operations.
9. Place waste from cleanup in proper disposal container.
10. Complete a “First Report of Injury” report and contact Occupational Health (936-0955) or, during off hours, the Emergency Department (322-0145) if exposure occurred.
11. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Pneumatic Tube Failure

1. Confirm the location of the outage by viewing the LED display on the tube station.
2. Use the alternate tube system if available in your area.
3. Assign runners to transport tube system contents to their destination.
4. Notify AOC/AC (835-1018) if additional help is required.
5. In the event of widespread pneumatic tube failure, contact the designated Emergency Operations Center (EOC) if additional resources are required (North EOC: 322-4362, South EOC: 936-6154).
6. Assign a staff member to check the computer in your work area on an hourly basis to obtain updates sent out through the Vanderbilt e-mail system. The designated staff member is responsible for providing updates to the supervisor/charge nurse in your work area as they become available.
7. Wait for announcement on the LED display that the situation is cancelled before returning to normal operations.
Medical Equipment Failure

Area Specific Information

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Medical Equipment Failure

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

If medical equipment fails during use or a malfunction is suspected you should:

1. Assess patient for injury.
2. Discontinue use.
3. Leave all selector knobs, switches and push buttons in same position as they were at the time of the incident. Take equipment out of service. Save for Clinical Engineering Services (CES).
5. Contact Clinical Engineering Services (322-3440)
   After hours, call hospital operator for an on-call technician.
6. Obtain approval of Clinical Engineering Services (322-3440) or Risk & Insurance Management (936-0660) before notifying the equipment vendor.
7. Prepare to activate unit/department sub plan.
8. Notify AOC/AC (835-1018) if additional help is required.
9. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu
**Area Specific Information**

<table>
<thead>
<tr>
<th>Duties</th>
<th>Person Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>All staff hearing the announcement should watch for the person described.</td>
<td></td>
</tr>
<tr>
<td>Report information to VPD.</td>
<td></td>
</tr>
</tbody>
</table>
Missing Person/Abduction

Refer to the How To section of the online Safety & Emergency Operations Manual (http://www.mc.vanderbilt.edu/ep/)

Refer to policy SA 30-10.01 Missing Person/Abduction Response

**Code Pink** - Missing Infant (younger than 12 months old)
**Code Purple** - Missing Child (age 1-12 years)
**Code Walker Adolescent** - (age 13-17 years)
**Code Walker Adult** - (18 years or older)

If a staff member suspects an infant, child, adolescent, or adult person is missing:

1. The Charge Nurse/Manager/Designee notifies VPD at 911 and provides the dispatcher with the following information:
   - Race
   - Build (slender, medium, heavy)
   - Gender
   - Hair color
   - Age
   - Clothing description
   - Height
   - Medical device

2. The Charge Nurse/Manager/Designee notifies Hospital Operator to make the appropriate age-specific missing person announcement, location, and description.

3. The charge nurse/manager/designee notifies the AOC (835-1018).

4. Staff of the unit for which the Missing Person or Abduction occurred must return to the unit.

5. Refer all questions to News and Public Affairs (322-4747)

6. Prepare to activate the unit specific security plan.

7. Staff in areas located at or around exits/access points of the medical center should monitor those areas and report any possible sightings of the missing or abducted person immediately to VPD (911).

8. All clinical staff in the hospital search their respective units and all adjacent common areas for the missing or abducted person.

9. Support and administrative staff not assigned to the incident should search common areas of the medical center to include hallways, corridors, garage connectors, cafeterias and break areas, basement and sub-basement connectors.

10. Wait for announcement that the situation is cancelled before returning to normal operations.

11. Call Risk management (936-0660) to report the incident and document the incident using the online incident reporting system @ http://veritas.mc.vanderbilt.edu

Overhead announcement for activation is **Code Pink, Code Purple, Code Walker Adolescent** or **Code Walker Adult** (depending upon the age of the missing person), followed by unit identification and a description of the missing person.
Elements of Emergency Operations Plan Overview

1. Emergency Response Team

2. Department Sub-Plan Activation

3. Emergency Operations Center

4. Recovery Operations

Internal Disasters Include: Fire, Flood, Earthquake, Tornado, and Utility Systems Shutdown

External Disasters Resulting in Mass Casualties Include: Transportation Related Accidents, Chemical, Biological or Radioactive Terrorist Threats, Natural Disasters, and Manufacturing Plant Accidents
Emergency Operations Plan Overview

Refer to the *How To* section of the online *Safety & Emergency Operations Manual* (http://www.mc.vanderbilt.edu/ep/) for detailed instructions.

The Emergency Operations Plan is designed to outline the responsibilities of Vanderbilt University Medical Center (VUMC) personnel in the event of an internal and/or external (Mass Casualty) Disaster to provide for an orderly transition of operations. The VUMC Emergency Operations Plan is modeled after the Incident Command System used by local, state, and federal emergency response agencies.

Through the Emergency Operations Plan, VUMC will:

1. Establish an Emergency Response Team
2. Assess the impact of the event on normal business activities
3. Continue to provide normal service unless the event precludes that ability
4. Establish an Emergency Operations Center (EOC) to implement necessary elements of the Incident Command System
5. Prepare for a modification of normal operations to include Area Specific Sub-Plan Activation if necessary
Emergency Response Team

The Administrator On-Call, when notified of an event, will assume the role of Incident Commander and contact the following:

VUH & VCH
Administrator On-Call / Administrative Coordinator

- Emergency Preparedness Coordinator
- ED Senior Attending Physician
- Public Information Officer On-Call
- VPD Shift Commander
- Safety Officer On-Call
- Plant Services Onsite (Delta)

**DOES THE EVENT PREVENT MAINTAINING NORMAL OPERATIONS?**

- **YES**
  - Activate Necessary Elements of Emergency Operations Center

- **NO**
  - Resolve With Available Resources
Incident Command Flowchart
### Activation

**Announcements**

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**Area Specific Information**

<table>
<thead>
<tr>
<th>Announcement</th>
<th>Basic Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red Alert, Location</td>
<td>Follow Fire Plan (RACE), Close Doors</td>
</tr>
<tr>
<td>Yellow Alert Standby For (Situation)</td>
<td>Prepare to Activate Response</td>
</tr>
<tr>
<td>Orange Alert For (Situation)</td>
<td>Activate Response</td>
</tr>
<tr>
<td>Code Pink</td>
<td>Missing Infant (younger than 12 months old)</td>
</tr>
<tr>
<td>Code Purple</td>
<td>Missing Child (age 1-12 years)</td>
</tr>
<tr>
<td>Code Walker Adolescent</td>
<td>Adolescent (age 13-17 years)</td>
</tr>
<tr>
<td>Code Walker Adult</td>
<td>Adult (age 18 years and over)</td>
</tr>
<tr>
<td>Code Black</td>
<td>Bomb Threat</td>
</tr>
<tr>
<td>Code Silver</td>
<td>Active Shooter</td>
</tr>
</tbody>
</table>
**Activation Announcements**

**STAT** - Medical Emergency  
**Red Alert (Location)** - Potential Fire Condition  
**Code Black (Location)** - Bomb Threat  
**Code Silver (Location)** - Active Shooter  
**Code Pink, Code Purple, Code Walker Adolescent or Code Walker Adult** (depending upon the age of the missing person) followed by **unit identification** and a **description of the missing person**  
**Yellow Alert Standby for (Situation)** - Prepare to activate the VUMC Emergency Operations Plan for **(Situation)**  
**Orange Alert (Situation)** - Activate Emergency Operations Plan for **(Situation)**  

**Applicable Situations**  
- Beeper System Failure  
- Oxygen Failure  
- Unannounced Survey  
- Mass Casualty  
- Critical Fuel Shortage  
- Mass Casualty CBRNE Incident (Chemical Plan, Bio Plan, Radiological Plan)  
- Inclement Weather  
- Steam System Failure  
- Vacuum System Failure  
- Internal Flood  
- Laboratory Computer System Failure  
- Medical Air Failure  
- Computer System Failure  
- Electrical Failure  
- External Flood  
- Tornado  
- Water Failure  
- Phone System Failure  

**Cancellation Announcement Examples**  
- Red Alert for 9 North has been cancelled  
- Yellow Alert Standby for Tornado has been cancelled  
- Code Pink – Missing Infant (younger than 12 months old) has been cancelled  
- Code Purple – Missing Child (age 1-12 years) has been cancelled  
- Code Walker – Adolescent (age 13-17 years) or Adult (age 18 years and over) has been cancelled  
- Code Black – (Bomb Threat) for 8 North has been cancelled  
- Orange Alert for Mass Casualty has been cancelled
Elements of Unannounced Survey: Emergency Operations Plan

1. Emergency Response Team

2. Emergency Operations Center (EOC)

3. Activation Announcement

Approved use of EOC for Unannounced Survey:

The Joint Commission (TJC) unannounced triennial survey, TJC Focus survey, CMS complaint survey, CMS validation survey,

State licensure survey.
Unannounced Survey

The Unannounced survey plan is designed to outline the responsibilities of VUMC personnel in the event of an unannounced survey (Joint Commission or State etc.) to provide for organization of operations during the survey and preparation of materials for survey or review. The plan is based on the nationally recognized Incident Command System format used during disasters.

When the Unannounced Survey Plan is activated, VUMC:

1. Establishes an Emergency Response Team.
2. Designates an Emergency Operations Center (EOC) to be activated (North EOC: 322-4362, South EOC: 936-6154) for the duration of the survey.
3. Continues to provide normal service.

Overhead announcement for activation of unannounced survey is: Orange Alert for Survey
Early Warning Weather Alert

A weather monitoring and early warning system will give faculty, staff, students, patients, and visitors time to prepare for potential severe weather. This weather monitoring system is exclusively for the Vanderbilt campus.

“YELLOW ALERT STANDBY FOR TORNADO” will be announced over the public address system when a Tornado Warning is issued for Davidson County or at the discretion of the AOC/AC based on weather conditions. Staff should assess the ambulatory status of all patients. Non-ambulatory patients should be turned away from the window, and curtains should be closed. When the threat has passed, “YELLOW ALERT STANDBY FOR TORNADO HAS BEEN CANCELLED” will be announced over the public address system.

“ORANGE ALERT TORNADO WARNING” will be broadcast over the public address system when a tornado has been identified approaching the Vanderbilt campus. Non-ambulatory patients should be turned away from the window, and curtains should be closed. Ambulatory patients must move to the interior part of the unit, away from doors and windows. DO NOT send patients or visitors to the basement of the Medical Center. Once the danger has passed, “ORANGE ALERT TORNADO WARNING HAS BEEN CANCELLED” will be announced over the public address system.

An outdoor warning siren will sound when a tornado has been identified approaching the Vanderbilt campus.

SEVERE THUNDERSTORM WARNING
An outdoor severe thunderstorm warning system will warn faculty, staff, and students when a severe thunderstorm is approaching the Vanderbilt campus. A short siren will sound followed by an announcement of a verbal “SEVERE THUNDERSTORM WARNING.” Take shelter immediately in a building or vehicle.
Emergency Radio System

For Emergency Operations Center Talk Group Designations (C1-C16), refer to the Emergency Phone & Fax Directory of the red Safety & Emergency Operations Manual.
Emergency Radio System

General Instructions

This portable radio is intended to replace normal modes of communications if those systems are out of service for any reason.

1. Conversations over the radio system should be kept short. Lengthy conversations are both difficult to conduct and tie up the radio system, preventing others from using the radios.
2. Stay with your assigned talk group. If you move off your assigned talk group, you may miss important information.
3. Keep your radio turned on. Even if you don’t think you will be using it, you can hear information being given to other users that could be useful.

Operating Instructions

1. Push-to-Talk: Press when talking and release when listening.
2. Back Light: Illuminates the display for ease of viewing.
3. On/Off Volume: Turns the radio on and off and adjusts the speaker volume.
4. Talk Group Selector: Turn this knob to permit switching from one talk group to another.
5. 3-Position Toggle Switch: Permits changing from one zone to the next (ALWAYS set this switch to “C”).
6. Display: Displays the name of the talk-group the user has selected.

Logistics Officer LOGIST
Planning Officer PLG/OP
Operations Officer PLG/OP
Finance Officer FINANC
Safety Officer INSSAF
Security Officer VUPD
Biomedical Electronics BIOMED
Information Mgmt DIM
Environmental Svcs (Hosp) ES-ADM
Lifeflight Dispatch LIFFLT
Patient Affairs PAT-AF
The Departmental Emergency Operations Sub Plan describes how a specific department responds to emergencies that suddenly and significantly impact the operations of the organization. In addition, some departments have and maintain additional department sub plans to support the core Emergency Operations Plan and its sub plans (Decontamination Sub Plan, Biological Sub Plan, Radiological Sub Plan, etc.).

Departmental sub plans must include the following components:

1. Chain of Command including succession plan.
2. Call tree including the names, position titles, contact numbers (e.g., home phones, pager, and cell phone).
3. Location of department command post (coordination center).
4. Phone number for department command post (coordination center).
5. Location of “tornado safe” areas.
6. Location of evacuation destinations inside and outside of the facility.
7. Department floor plan which includes the location of pull stations, medical gas zone valves, emergency kit, fire extinguisher, code cart, and red phone.
8. Location of additional department sub plans if applicable that support the core Emergency Operations Plan.