

MAJOR INCIDENT MEDICAL MANAGEMENT AND SUPPORT

The Practical Approach in the Hospital

Advanced Life Support Group

By
Simon Carley
Kevin Mackway-Jones

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■ PREFACE ■

It is now nearly 10 years since the Advanced Life Support Group published its first book on major incident response. That book (*Major Incident Medical Management and Support: the practical approach at the scene*) and its accompanying course, affectionately known as MIMMS, are now established around the world as best practice guides. The CSCATTT approach to incidents has become a standard like ABC.

For some of us, however, the focus on the first phase of the response (the pre-hospital phase), while a good place to start, did not solve all our problems. Our practice was more likely to be delivering care within the hospital environment, and a course dedicated to this seemed badly needed.

This book has been written with the aim of promulgating the disciplines and lessons of MIMMS to the hospital provider. We hope that the multi-professional team needed for a successful response can use this text and its accompanying course (to be known as Hospital MIMMS) as successfully as their pre-hospital colleagues have used MIMMS. Certainly our pilot courses have suggested that the package does fill an unmet need. We hope that those of you who read it and train with us agree.

The days spent on courses are just part of a learning process; both skills and knowledge need continual reinforcement. At the end of your HMIMMS course you will receive a logbook for you to use back at your place of work.

K Mackway Jones
S Carley

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UPDATES

The material contained within this book is updated on a 4 yearly cycle. However, practice may change in the interim period.

We will post any changes on the ALSG website, so we advise that you visit the website regularly to check for updates (url: www.alsg.org/updates). The website will provide you with a new page to download and replace the existing page in your book.

REFERENCES

References are available on the ALSG reference centre www.alsg.org/references.

ON-LINE FEEDBACK

It is important to ALSG that the contact with our providers continues after a course is completed. We now contact everyone six months after the course has taken place asking for on-line feedback on the course. This information is then used whenever the course is updated to ensure that the course provides optimum training to its participants.

PART
I

INTRODUCTION

The epidemiology and incidence of major incidents

INTRODUCTION

A major incident is said to have occurred when an incident requires an extraordinary response by the emergency services. While major incidents may affect any of the emergency services, the health service's focus is the resulting casualties. A major incident cannot, however, simply be defined in terms of the number of casualties—the resources available at the time of the incident are also relevant. For example, a road traffic accident in a remote area producing five multiply injured casualties may overwhelm the immediately available local resources. However, a similar incident in a major urban conurbation may require little or no additional resources. Thus, the same incident in different localities may produce a major incident in one but not in the other.

For the purposes of planning, major incidents have been defined as: *events that owing to the number, severity, type or location of live casualties require special arrangements to be made by the health services*.

Local Highlights: Major incident definition

This definition is an operational one that recognises that major incidents occur when the resources available are unable to cope with the workload from the incident. The need to relate major incidents to the availability of resources is most clearly demonstrated when considering incidents that produce 'specialist' types of casualties. An incident producing paediatric, burned or chemically contaminated casualties may require the mobilisation of specialist services even when there are only a few casualties. This is because the expertise and resources needed to deal with these types of casualties are limited and widely scattered around any country.

Incidents such as plane crashes may occur in which all casualties are dead at the scene. Whilst these are clearly major incidents for the police and fire service, there is often little requirement for the health service beyond mortuary and pathology services. An example