**Mission:** Advise the Incident Commander or Section Chief, as assigned, on issues related to the response to radiological incidents.

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| Position Reports to: **Incident Commander** Command Location: | | |
| Position Contact Information: Phone: ( ) - Radio Channel: | | |
| Hospital Command Center (HCC): Phone: ( ) - Fax: ( ) - | | |
| Position Assigned to: | Date:  **/ /** | Start: \_\_\_\_:\_\_\_\_ hrs. |
| Signature: | Initials: | End: \_\_\_\_:\_\_\_\_ hrs. |
| Position Assigned to: | Date:  **/ /** | Start: \_\_\_\_:\_\_\_\_ hrs. |
| Signature: | Initials: | End: \_\_\_\_:\_\_\_\_ hrs. |
| Position Assigned to: | Date:  **/ /** | Start: \_\_\_\_:\_\_\_\_ hrs. |
| Signature: | Initials: | End: \_\_\_\_:\_\_\_\_ hrs. |

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| **Immediate Response (0 – 2 hours)** | **Time** | **Initial** |
| **Receive appointment**   * Obtain a briefing from the Incident Commander on: * Size and complexity of the incident * Expectations of the Incident Commander * Incident objectives * Involvement of outside agencies, stakeholders, and organizations * The situation, incident activities, and any special concerns * Assume the role of Medical-Technical Specialist: Radiological * Review this Job Action Sheet * Put on position identification (e.g., position vest) * Notify your usual supervisor of your assignment |  |  |
| **Assess the operational situation**   * Verify from the emergency department leadership or other clinical sources and report the following information to the Incident Commander: * Number and condition of both non-contaminated and contaminated patients and hospital staff * Type and amount of radioactive isotopes involved * Type of radiation incident:   + External radiation exposure only   + External contamination only   + External contamination with internal exposure * Time incident occurred * Medical problems present, in addition to radionuclide contamination * Assessment measures taken at the incident site (e.g., air monitors, fixed radiation monitors, nasal smear counts, and skin contamination levels) * Potential for industrial, biological, or chemical material exposures expected in addition to radionuclide |  |  |
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| **Activities**   * Advise the Operations Section Hazardous Materials (HazMat) Branch Director on the preparation of the emergency department for the arrival of victims, including personal protective equipment (PPE) for radiological decontamination response * Verify with the Safety Officer and the Operations Section Security Branch Director that all access to the emergency department has been secured to prevent media or other non-authorized people from entering into the treatment area during treatment or the decontamination process * Coordinate activities with the Operations Section HazMat Branch Director and the Medical Care Branch Director * Meet regularly with the Hospital Incident Management Team (HIMT) to plan and project patient care needs * Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested * Ensure that a staff member trained in the use of a survey meter is stationed at the entrance of the decontamination area to monitor personnel and equipment leaving the radiation decontamination room or area * Address radiation related questions that may arise from other areas such as the laboratory, operating rooms, and critical care units * Provide clinical staff with treatment guidelines for isotope exposure as applicable, including countermeasures * Assure that the exposure of responding personnel is tracked and recorded (film badge or dosimetry) * Ensure notification of the Radiation Safety Officer of the incident, impact and current activities * Provide information to the Public Information Officer for press releases, as requested * Collaborate with external resources (i.e. local health department, Poison Control Center, Radiation Emergency Assistance Center or Training Site) as needed * Obtain information from appropriate resources or web site programs * Ensure communications are sent to the local water authority and other local, state and federal agencies if decontamination runoff is an issue |  |  |
| **Documentation**   * HICS 213: Document all communications on a General Message Form * HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis |  |  |
| **Communication**  *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners* |  |  |

| **Intermediate Response (2 – 12 hours)** | **Time** | **Initial** |
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| **Activities**   * Transfer the Radiological Medical-Technical Specialist role, if appropriate * Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital * Address any health, medical, and safety concerns * Address political sensitivities, when appropriate * Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) * Respond to requests and concerns from incident personnel regarding radiological agents involved and treatment concerns for victims and hospital personnel * Develop plans to assess, isolate, and remediate any hospital contamination * Continue to ensure appropriate decontamination processes including: * Monitoring patients and the decontamination team during and after patient care * Surveying contaminated areas, patients, and exposed hospital personnel * Collecting samples for subsequent analysis * Collecting and managing any radioactive wastes (solid and liquid) generated during the decontamination process * Evaluating staff dosimeters and ensuring proper follow up if indicated * Prepare and maintain records and reports * Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operational needs * Regularly update the following on your actions and recommendations: * Industrial hygienist * Safety Officer * Logistics Section Employee Health and Well-Being Unit * Operations Section Hazardous Materials Branch Director * Operations Section Victim Decontamination Unit Leader |  |  |
| **Documentation**   * HICS 213: Document all communications on a General Message Form * HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis |  |  |
| **Communication**  *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners* |  |  |

| **Extended Response (greater than 12 hours)** | **Time** | **Initial** |
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| **Activities**   * Transfer the Radiological Medical-Technical Specialist role, if appropriate * Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital * Address any health, medical, and safety concerns * Address political sensitivities, when appropriate * Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) * In collaboration with the Operations Section Hazardous Materials (HazMat) Branch Director, oversee the medical clearance for hospital personnel and report the results to the Operations Section Chief and Logistics Section Employee Health and Well-Being Unit Leader * Direct the monitoring of hospital decontamination processes as needed, in collaboration with the Operations Section HazMat Branch Director * In collaboration with the Operations Section HazMat Branch Director and Security Branch Director, determine how contaminated personal vehicles used to bring patients to the hospital should be managed * Meet regularly with the Incident Commander or Operations Section Branch Directors to update on current status and conditions |  |  |
| **Documentation**   * HICS 213: Document all communications on a General Message Form * HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis |  |  |
| **Communication**  *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners* |  |  |

| **Demobilization/System Recovery** | **Time** | **Initial** |
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| **Activities**   * Transfer the Radiological Medical-Technical Specialist role, if appropriate * Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital * Address any health, medical, and safety concerns * Address political sensitivities, when appropriate * Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) * Ensure an analysis is made of all specimens taken from potentially contaminated items or water * Ensure hospital personnel and Employee Health and Well-Being Unit Leader are aware of any significant information resulting from exposure to radiation and recommendations for follow up-care and monitoring * Ensure the Operations Section Security Branch Director has custody of all suspected contaminated evidence for release to proper authority in sealed container * Ensure the return or retrieval of equipment and supplies * Participate in other briefings and meetings as required * Submit comments to the Incident Commander on lessons learned and procedural or equipment changes needed * Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include: * Review of pertinent position activities and operational checklists * Recommendations for procedure changes * Accomplishments and issues * Participate in stress management and after action debriefings |  |  |
| **Documentation**   * HICS 221: Demobilization Check-Out * Ensure all documentation is submitted to the Planning Section Documentation Unit |  |  |

| **Documents and Tools** |
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| * HICS 203 - Organization Assignment List * HICS 213 - General Message Form * HICS 214 - Activity Log * HICS 215A - Incident Action Plan (IAP) Safety Analysis * HICS 221 - Demobilization Check-Out * Hospital Emergency Operations Plan * Incident Specific Plans or Annexes * Material Safety Data Sheets (MSDS) * National Institute for Occupational Safety and Health (NIOSH) Pocket Guide * Managing Hazardous Materials Incidents, Volume II - Hospital Emergency Departments: Planning Guide for the Management of Contaminated Patients * Hospital organization chart * Hospital telephone directory * Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication |