

## MEDICAL PREPAREDNESS ACTION PLAN

Western Governors' Association  
Technical Advisory Group on WIPP Transport

Effective medical response to an incident involving a WIPP shipment requires the following elements: a clear understanding by emergency personnel of hospital radiological emergency response plans;<sup>1</sup> training including drills and exercises for hospital personnel and the necessary radiological equipment. Periodic testing, updating, and refinement of radiological response plans and procedures is crucial for ensuring a prompt and capable medical response to a WIPP transportation incident. These plans and procedures must include provisions for the decontamination of medical resources, emergency rooms, and victims of radiological exposure. In order to build public confidence that transuranic waste can be shipped safely and uneventfully, these elements must be made part of the WIPP transport safety program.

The WGA Technical Advisory Group recognizes that each state along the WIPP corridor has unique governmental, institutional and geographic characteristics. This action plan attempts to address the different circumstances facing each state by serving as a tool for the state personnel who will be interacting w the hospitals to determine the medical preparedness needs along the western WIPP corridor. The action plan has two sections: 1) suggestions for interacting effectively with hospitals; and 2)a sample assessment describing the recommended areas that states and hospitals should address in order to determine whether assistance is needed to attain medical preparedness.

### *Suggestions for Achieving Effective Interaction with Hospitals*

1. Facilitate a Dialogue between the State and the Hospital. Hospitals have a variety of requirements that they must meet to receive accreditation. This action plan is not intended to be an "audit" of hospitals to ascertain whether they are fulfilling their accreditation requirements. Instead, states should work cooperatively with hospitals to determine whether mutual medical preparedness needs exist that could be addressed, through the WIPP Safe Transport Program. The sample assessment outlines the medical preparedness areas that the WGA Technical Advisory Group believes should be addressed; however, hospitals should be encouraged to suggest issues that they believe are relevant but that are not contained in the sample assessment.
2. Explain the purpose of the medical preparedness action plan. State personnel should explain the process for developing a regional approach to medical preparedness, as well as how medical preparedness fits into the WIPP Safe Transport Program. Explaining the state's role and perspective on the WIPP Safe Transport Program will help the hospitals furnish the states with accurate and useful information.

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<sup>1</sup> For the purposes of this project, the term 'hospitals' will include emergency response clinics (e.g., small rural clinics and/or private treatment facilities) that would be expected to provide medical services to patients generated. by a WIPP transportation incident.

3. Conduct on-site hospital visits. On-site visits are critical to achieving effective interaction with the hospitals. On-site visits ensure that adequate attention is paid to the medical preparedness as it pertains to WIPP shipments, as well as familiarizing state people with each hospital. Meaningful dialogue is more readily attained in person than over the phone.
4. Identify a variety of hospital participants. Do not limit the on-site discussions to hospital administrators. New Mexico's experience with this issue has shown that physicians, nurses and emergency room personnel can give an additional valuable perspective on a hospital's medical preparedness needs. Usually, physicians and nurses are more familiar with radiological medical plans and procedures than the administrators are and can accurately pinpoint any needs that may exist. State personnel should be available to meet with hospital boards and other hospital organizations to describe the medical preparedness action plan.
5. Other Concerns. Encourage hospital personnel to identify any issues of concern that are not addressed by this action plan. This action plan will be modified to incorporate any relevant medical preparedness issues that have not been addressed. Please forward any new concerns and suggested actions identified by hospitals to WGA.

#### *Medical Preparedness Sample Assessment*

This sample assessment outlines medical preparedness issues that could be addressed cooperatively by states and hospitals. The issues are divided into three main categories: hospital plans, training and exercises, and radiological equipment.

1. Hospital Radiological Plans & Procebm
  - Does a radiological response plan exist? (note: hospitals usually have a variety of plans: disaster, hazardous materials, radiological. Distinguishing among the types of plans is important.) Does the facility plan to accept radiological emergency cases? If not, how could the hospital achieve the necessary level of comfort to accept radiological emergency cases?
  - Is the Radiological Response Plan a stand alone document or an annex to another plan?
  - When was the last time the plan was reviewed? By whom was it reviewed? Has it received any type of certification or accreditation?
  - Do any Memorandums of Understanding with other hospitals pertaining to radiological incidents exist? If so, please describe.
  - DOE Carlsbad Field Office has developed a hands-on training session to assist hospital administrators and clinicians along the WIPP route in developing hospital-specific radiation emergency response plans. It is anticipated that this training will be conducted [timeframe and location to be identified]. Some

assistance will be available to pay the travel and per diem costs associated with attending the training session. Would your hospital be interested in participating in a training session?

DOE will pay for all of the costs associated with the instructor, including salary, travel and per diem costs. There will be no registration costs associated with the training. The hospitals will be responsible for paying the salaries of all hospital employees who attend the training.

## 2. Training and Exercises

- What training courses that included radiological materials have been offered to hospital personnel? Who was trained? How did the attendees evaluate the course? Did the attendees receive credit or otherwise satisfactorily complete the course?
- What exercises involving radiological materials have been conducted? When were these exercises conducted? Who was involved in the exercises?
- Were needed changes to the hospitals radiological emergency plan identified as a result of these exercises? How were the identified changes incorporated? Were any critiques or after-action reports on the training/exercises prepared? If so, could the report be shared with state personnel to assist them in developing recommendations to DOE?
- On-site training conducted jointly by personnel from the DOE contractors, state government, and Washington TRU Solutions is available. This training includes an overview of WIPP (upon request), the basics of radiation physics, decontamination procedures, patient assessment (including use of the detection equipment), medical treatment, and referral protocols. The course will specifically emphasize response to WIPP-transport accidents. Materials will be left at each facility so that follow-up training can be accomplished for those who cannot attend the initial session or for future refresher training. If the hospital is not interested in participating in on-site training, are there other hospital radiological materials training needs that need to be addressed?

## 3. Radiological Equipment

- The following equipment or equivalent substitutes is suggested for medical response to a WIPP incident<sup>2</sup>

Amount	Description
1	Storage Case
1	Decontamination Backboard
1	Decontamination Basin
2	Floor Runners

<sup>2</sup> This list was developed by the State of New Mexico, working cooperatively with hospital personnel

1	Large Areas Tarp
50	Yellow Plastic Waste Bags
300'	White Plastic Chain
6	White Plastic Stanchions
3	Yellow "Hazardous Area" or "Radiological Area" Signs
12	Disposable Suits and Show Covers
1	Roll of "Hazardous Area" Tape
2	Radiation Survey Meters with Cases

Does this hospital have the suggested equipment? (i.e., periodic calibration of monitors, etc.)

- How does the hospital provide for training for this equipment?
- Is the equipment contained in a central or easily accessible location?
- If the hospital is lacking this equipment, would it be interested in receiving assistance to attain the missing equipment?

States will pay for all equipment costs out of the Cooperative Agreement funding. If the equipment is contained on the list shown above, the costs will be eligible expenses under the cooperative agreement. If the desired equipment is not contained on the Equipment List prior authorization from DOE and WGA will be required. The hospitals will be responsible for maintenance and calibration of the equipment. Since the yearly cost of calibrating a survey meter is less than \$100 this should not impose an undue hardship upon the hospital.. The states have the option of using discretionary funding to pay for calibration of survey meters for the hospitals.