



POLICY ON EMERGENCY DEPARTMENT HAZARDOUS MATERIAL RESPONSE PLAN

1. PURPOSE AND SCOPE

This document is a policy of the Australasian College for Emergency Medicine and relates to response to a single presentation or mass presentations to the emergency department by people known or believed to be contaminated by hazardous chemical, biological or radiological materials.

This policy applies to materials, regardless of source, that have a credible, real or potential risk of harm to any person coming into contact with either the material or with a person contaminated by the material.

The policy is applicable to public hospital emergency departments within Australasia.

2. POLICY

Emergency departments need to have a response plan to hazardous materials contamination incidents which protects staff and other people in the emergency department while providing timely care for those exposed to, or contaminated by hazardous materials.

3. PROCEDURES AND ACTIONS

- 3.1 Although response to hazardous material may be included in generic mass casualty disaster response plans, additional planning is required for management of a single or limited casualty presentation, not requiring a disaster response.
- 3.2 Planning needs to provide for response when there is little or no advance warning of presentations by contaminated people.
- 3.3 Appropriate Personal Protective Equipment (PPE) needs to be provided to protect any participating staff against the hazard. This will be more than the standard universal precautions.
- 3.4 Guidelines need to be created on use of PPE and on which members of staff may or may not be able to use the PPE or participate in a response, guided by relevant principles of Occupational Health and Safety.
- 3.5 Staff who may be involved in a response need competency training in use of appropriate PPE on a regular and ongoing basis.
- 3.6 Procedures will be needed to protect the emergency department's physical environment and equipment from contamination so that it may be used to safely continue providing care for those not involved in the hazardous material incident.
- 3.7 Methods of effective decontamination of single or multiple casualties need to be provided. Methods of isolating those contaminated prior to decontamination will also be required. This may be within or adjacent to the emergency department.

- 3.8 Emergency departments may need to consider specific sources of hazardous materials in the area they service, such as those used by industry and agriculture.

4. DATES AND NOTES

Approved by Council: November 2003

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34 Jeffcott Street West Melbourne VIC 3003

Ph: 61 3 9320 0444 Web: www.acem.org.au