

## Short Article

# What Constitutes a Good Medical Emergency Drill Report?

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**ABSTRACT :** *Good reporting of medical drill is important to optimise learning and benefit from the activity. This article shares our opinion on what constitutes a good medical emergency drill report. A good medical emergency medical drill report should include medical drill background, observation, remarks on observation and details of observers and reporter.*

**Keywords** – *Drill, Medical Emergency, Preparedness, Report*

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## 1.0 INTRODUCTION

Medical Emergency Preparedness is important at all worksites especially those with high risk. Medical emergency drills need to be conducted periodically to check whether the site's medical emergency response plans are appropriate and response team is ready to execute it smoothly in the event of a real emergency. Good reporting of the drill optimises learning and benefit from the activity.

Sites without medical professionals experienced in conducting medical emergency drills may not be clear on how to report such activities. This article is to share our thoughts on what constitutes a good medical emergency drill report.

## 2.0 CONTENTS

A good medical drill report should contain medical drill background, observation, remarks on observation and details of observers and reporter.

### 2.1 Medical Drill Background

Background information should include type of incident, location, number of victims, types of injury, types of medical condition, severity and expected actions by responders.

Examples of incidents in a worksite would include explosion, fire, chemical release, fall, traffic accident or even personal health conditions such as heart attack or stroke. An incident can occur at different areas of an organization such as office, production, laboratory, warehouse or traffic area. The scenario may involve a single casualty or multiple casualties. Types of injury could range from fracture to bleeding, bruising, burns including chemical burns, inhalation injury and polytrauma. Personal emergency medical conditions would include stroke and heart attack. Workers' condition can be mild where they can still walk without aid or severe where they were immobile, unconscious or not breathing. Layout plans and sketches should be included where appropriate.

### 2.2 Medical Drill Observations

Medical drill observations should include the date and time the drill started and ended; the number of patients; the types and severity of injury or medical condition; the time victims were discovered; alarm was raised and first aider arrived; safety

aspects such as patient and rescuer safety; personal protective equipment (PPE) used; decontamination done; first aid or treatment given and quality ; documentation of measures taken by responder (photograph of measure are helpful); transfer of patient from scene to treatment area and ambulance and; time of ambulance arrived and transferred patient to hospital; command, control and communication at the scene. When receiving the call, the following “ETHANE” should be specifically addressed by the receiver.

<b>E</b>	Exact location
<b>T</b>	Time when it occurred
<b>H</b>	Hazard identified
<b>A</b>	Access to location status
<b>N</b>	Number of casualties
<b>E</b>	Emergency devices (other than medical team) that have arrived

### 2.3 Medical Drill Observations

During a medical emergency drill, observers should identify and remark on good practices and areas for improvement observed. Table 1 below provides examples.

**Table 1 Examples of good practice and areas for improvement**

Aspect	Good Practice	Area for Improvement
Scenario	Likely situation, i.e. heart attack in office	Unlikely situation, i.e. 5 casualties in small plant
Alarm raised	Immediately	Late
First Aider arrival	Within 5 minutes	More than 5 minutes
Safety (patient and responder, including external)	Respected. Explain risks, provide SDS*, CEMG**	Disregarded
PPE provided and used (including external team)	Appropriate i.e. gloves, apron, respirator shield, shoes worn properly	Not used or improperly used
Decontamination	Done immediately, 15-20 minutes duration, remove clothes	Inadequate or inappropriate
First Aid or treatment	Given, proper equipment and technique.	Inadequate or inappropriate
Documentation of measures	Number of victims, condition, what was done	Inadequate or inappropriate
Transfer of patient from scene to treatment area and ambulance	Proper lifting and transfer technique. Worker secured to avoid risk of falling	Improper and insecure
Ambulance, equipment and medical team for severity of condition	If severe, fully equipped cardiac ambulance with doctor, paramedic or nurse responded.	Inadequate or inappropriate
Time of ambulance arrival and transfer to hospital	Within 10 minutes to arrive and 10 minutes to transfer	More than 10 minutes to arrive and 10 minutes to transfer
Command, Control and Communication	Clear leader, instructions and communication	Inadequate or inappropriate

Abbreviations: \*SDS: Safety Data Sheet, \*\*CEMG: Chemical Emergency Medical Guidelines

#### 2.4 Medical Drill Details of Observer and Reporter

Observer details should include name, designation and relevant qualification (related to medicine or first aid). Reporter details should include name, designation and date report written.

### **3.0 CONCLUSION**

A good medical emergency drill report should provide medical drill background, observation, remarks on observation and details of observers and reporter. Layout plans, sketches and photographs should be used to augment report.