The opinions expressed are those of the presenters and may not necessarily reflect Montana State University.
Group Guidelines

• Stories stay, lessons leave
• Make sure everyone is heard in your small group discussions
  • Limit your comments to a couple of sentences so that you don’t dominate the discussion.
  • Three and me principle where you allow three people to speak before you speak again.
• Speak with the expectation you will be heard and listen with the opportunity to be changed.
• Use “I” statements so that you are speaking from your personal experience.
• Take risks and expect discomfort: We ask that you contribute to discussions and exercises by sharing your thoughts, feelings, and experiences. Sometimes this may involve personal discomfort and risk taking. It is up to you the degree of risk or disclosure you make.
Laboratory Emergency Preparedness

Scott Sanders
Director, Emergency Management
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“Problems vs. Emergencies”

• Problem-(noun)-a matter or situation regarded as unwelcome or harmful and needing to be dealt with and overcome.

• Usually an inconvenience

• Generally, people experience several “problems” throughout the day and solve them singularly and without due harm

• Time is on your side

• Inconvenience/Problem/EMERGENCY
Emergency-(noun) A serious, unexpected, and often dangerous situation requiring immediate action.

- “Immediate” is the key word
- Bodily harm or potential threat of life
- **Time** is critical
Emergencies that fall outside the “norm”

- Not always covered in a safety manual
- We don’t wake up and expect a possible emergency to occur
- We need to be prepared to face a possible emergency
- Vigilant but not hyper-vigilance
Unexpected Emergencies

Medical Emergencies:

• Exposures (inhalations, ingestions, etc.)

• Trauma (Falls, etc.)

• Other medical (allergies, breathing difficulty, chest pain, etc.)
Recognition

Do you know your co-workers?

• Can you tell if someone or something is “off”?

• Be observant

• Know the locations of AED’s, be proficient in CPR
  • Early CPR and defibrillation is key to a successful outcome
  • Rapid activation of 911 response
911 response activation

• Attempt to have someone flag down responders and guide them to the patient
• Try to have relative information ready if possible (falls-did pt. lose consciousness? Hit head?)
• Have someone specific to contact family members if applicable
• Try to maintain composure (easier said than done), “calm is calm-ing”
Fire considerations

- Understand and practice fire drills and evacuations

- Do you know how to use a fire extinguisher? Will you attempt to use it?
  - One and done (reason why extinguishers are placed near exits)
  - Activate 911
  - Attempt to isolate fire by closing doors on your way out if possible
  - When in doubt-GET OUT

- Try to maintain accountability with staff and/or people in the building
- Designate a person to meet with firefighters-explain problem, people remaining
National incidents
Hazmat spill/release

• What is the product?
• Do we know the hazards?
• Are there any victims exposed?
• Decontamination?
  • Who?, how many? Self or assisted?
  • What? Method of decon?
  • Where? Inside, outside, internal showers?

• Triage? Evacuation? Isolation?
Can we confine or isolate the problem?

- Spills, isolate or contain
- Ensure ventilation methods are being used or abandon if necessary
- Identify chemical and/or mixtures if possible
- 911 intervention or handle internally?
Violent incidents

• Active shooter/killer
• Understand your surroundings and be situationally aware

• **Run** - Get away to a known, safe place if possible.
• **Hide** - Secure and lock doors, use items to block entrances
• **Fight** - Find weapons and fight back as a last resort

• If you see something, say something.
Closing

• Although we cannot be plan for every type of emergency or event, we can prepare and raise confidence
• Build and maintain situational awareness
• Establish discussions among staff for the emergencies that fall outside of a standard safety plan
• Questions/Comments?