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EMERGENCY PLAN FOR BUILDING 26

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LAWRENCE BERKELEY LABORATORY
UNIVERSITY OF CALIFORNIA ■ BERKELEY

EMERGENCY PLAN FOR BUILDING 26

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MEDICAL SERVICES EMERGENCY PLANS
(Building 26)

A. PURPOSE & SCOPE

The purpose of this plan is twofold:

1. To act as a guide for safeguarding medical services personnel and maintaining building and equipment integrity in the event of an emergency such as fire, personal injury, noxious gas release, radioactive spill, power failure, flood, earthquake, or threat of trespass.
2. To lay out procedural guidelines for the Medical Department's response to emergencies elsewhere at LBL.

The scope of this document includes first response duties and procedural instructions. Instructions for specialized professional activities, such as treatment of acid burns, procedures for employee nonoccupational emergencies, etc., are to be incorporated in the Health & Safety Guide.

B. MEDICAL DEPARTMENT ORGANIZATION

1. Physicians on immediate call:

Stauffer, H. H. 6266; home phone 284-4016

Snow, L., 6266; home phone 841-4855

2. Backup physicians:

Budinger, T. F., 5435; home phone 527-5623

Born, J. L., 72-2314; home phone 848-9818

Donald, W. G., 848-8800; home phone 524-5780

Kostainsek, V. M. 848-2056; home phone 524-5867

Weaver, J. C., 848-7676; home phone 845-3522

3. Communications:

Wales, M. C. 6266; home phone 283-1580

Backup communications:

Darrimon, N. A., 6266; home phone 933-5248

Charles, W., 6266; home phone 653-8320

Gunderson, H. I., 6266; home phone 827-0857

4. Nursing staff and prime aid supervisor:

Grondona, C., 6266; home phone 837-7313

Vaughan, P. N., 6266; home phone 933-3953

Copland, G. A., 6266; home phone 339-0622

Proteau, A. P., 6266; home phone 529-0633

5. X-ray and EKG:

Proteau, A. P. (as above)

Backup EKG: Vaughan, P. N. (as above)

Backup X-ray: Gronodona, C. (as above)

6. Laboratory medicine:

Suna-Bovey, V., 6266, home phone 531-6587

7. RADIATION PROTECTION AND SPILL EMERGENCIESPhysicians

Stauffer, H. H. (as above)

Snow, L. (as above)

Backup physicians:

Biggs, M. W., 8-7433; home phone 846-5749

Beatty, J. O., 8-7433; home phone 846-4282

Dobson, R. L., 8-8311; home phone 841-8920

Winchell, H. S. 6369; home phone 284-9628

Born, J. L. (as above)

Emergency biochemistry and bioassay

Schmidt, C. T., 6266; home phone 939-1998

Yaeger, D. J., 6266; home phone 536-8441

Drisdale, R. C., 6266; home phone 535-0519

Whole-body counting

Sargent, T. W., 5926; home phone 848-5684

Kusubov, N., 5926; home phone 524-2764

Schmidt, C. T. (s above)

C. LOCAL EMERGENCY

Definition: Local emergency is an emergency that affects the individuals in Building 26 itself or equipment contained therein, or both.

Building Manager: M. C. Wales

Assistant Building Manager: W. P. Letchworth

In the event of an emergency, the clerical staff has responsibility for alerting emergency facilities outside of Building 26. Without hesitation, any emergency should be reported by dialing 5333.

Person in charge: M. C. Wales

In the event the person in charge is not at the site during the time of emergency, the following individuals are in authority:

Stauffer, H. H.

Letchworth, W. P.

Grondona, C.

Copland, G. A.

If one individual is absent, the next one on the list is in authority.

Personal Injury: The Medical Department will respond internally to personal emergency in the same fashion that it responds to other personal injuries at LBL, except the emergency will not be sounded by calling 5333 unless the physician is injured, or the injury

is such that medical care beyond the facilities present in Building 26 might be required.

Noxious gas, smoke, or fire: The person in charge is responsible--

First, to call in emergencies,

Secondly, to designate an individual to alert everyone in the building for evacuation,

Thirdly, to supervise the conduct of building evacuation. The evacuation schedule and route is as follows:

<u>Equipment to be removed</u>	<u>Responsible employee</u>
Physician's bag	Connie Grondona
Electrocardiograph	Polly Vaughan
Handitalkie-Med-1	Nancy Darrimon
Handitalkie-Med 2,3	Marcy Wales
Defibrillator	Alberta Proteau
Bioassay history file	Charles Schmidt, Dave Yaeger
Microscope with camera	Velta Suna-Bovey
Backup for above*	Henry H. Stauffer

*When possible, each individual is to backup the person preceding him or her in the above listing of employees.

Evacuation route: Each person is to leave building by exit of proximity. There are four exits on the second (street) floor, and two exits on the first (basement) floor.

Fire or highly suspicious object such as potential bomb: Proceed as above.

Radioactive spill: The only area for radioactive spill in the normal routine working operation is Room 014, under the supervision of Dr. Charles Schmidt. Procedure is as follows: Access to the area from the first floor will be sealed by blocking with a sign and masking tape (tape to be located in receptionist's desk). Do not lock the stairway door from the second floor to the first floor.

Power failure: Should a local failure occur without smoke or odor of electrical burn, the electricians should be called at 6011. Should a general power failure occur due to earthquake or other cause, a disaster situation should be assumed, and the person in charge or his designee will activate the emergency power in the following fashion:

Proceed to the first floor, Room 201, and activate switches on emergency panel No. 64A7C2EB, as marked on the panel. The EKG machine and defibrillator should be uncovered, and the EKG machine energized. Emergency lights and refrigerators should be checked for operation.

C. EMERGENCY SITUATION OUTSIDE BUILDING 26

There are five categories of medical emergency:

1. Serious injury of 3 or fewer people (patient can be moved):

The response of the Medical Department is as with a minor injury of one individual. The ambulance or vehicle delivering each individual to Building 26 will stand by in the event that further transportation is required. Building 26 operates as a hospital emergency room. If further assistance is required, it will be called at the discretion of the physician and/or nurse through the communications system already available with community physicians.

2. Serious injury (patient cannot be moved): The physician and/or nurse will proceed to the injury site in the event a patient cannot be physically moved. The injured pinned or partly crushed under heavy equipment should not be extracted until first aid personnel are in control. Certain life-threatening situations require immediate forceful removal of the injured; however, these are the exception. The danger in immediate patient removal is injury aggravation.
3. Emergency involving 4 or more people: Any serious emergencies involving 4 or more people will require transportation of at least one injured individual to a community hospital if there has been no radioactive contamination. The individual to be transported first will be selected by the physician or nurse who will be called to the scene for triage purposes.
4. Injury with radioactive contamination: The decontamination room will be used as a staging area for 3 or fewer injuries. In the event of more than 3 injuries all of whom have radioactive contamination, an auxiliary decontamination center will be activated using an 8-man tent stored in Building 25.
5. Laboratory-wide disaster with more than 10 injuries with or without radioactive contamination: The basic role of Medical Services personnel is patient triage, i.e., determination of:
 - a. Injured beyond help,
 - b. Injured who can be saved by immediate prime aid,
 - c. Injured who need medical aid, but will survive without immediate professional attention.Group 2 will be attended to by the physician or physicians on the scene. Emergency transportation will be for the benefit of this group under the direction of the physician/nurse.

D. COMMUNICATIONS

Dr. Stauffer can be reached by:

1. Pageboy: Dial 25 (pause for clear tone) 50. Give message after tone ceases (click). No one but the Medical Services personnel is to use this communication device.

2. Handi-talkies:

Three handi-talkies are assigned as follows:

Med-1: C. Grondona

Med-2: M. Wales

Med-3: H. Stauffer

CATEGORIES OF ACCIDENTS (Ref: DOE APPENDIX 0502)

A. Type "A" Accident is one in which there is:

1. Any fatal or imminently fatal injury or occupational illness involving an DOE or DOE contractor employee or a member of the public due to an accident or fire associated with an DOE or DOE contractor operation.
2. Any other disabling injury or occupational illness of five or more persons as a result of one occurrence in an DOE or DOE contractor operation.
3. Estimated loss or damage to DOE or other property amounting to \$100,000 or more or estimated costs of \$100,000 or more required for cleaning (including decontamination), renovating, replacing, or rehabilitating structures, equipment, or property.

PRESERVATION OF SCENE OF SERIOUS (TYPE A) ACCIDENT

The DOE requires that the scene of a serious (Type A) accident be preserved to the greatest extent possible until an DOE investigating team has reviewed the scene. Thus in the event of any of the above situations the following action must be taken:

1. Securing of the accident scene, mobile or fixed, to preclude disturbance or alteration by anyone until the DOE investigation team has reviewed the scene.
2. Prevention of equipment or articles involved in the accident from being operated, moved or otherwise altered, except as essential to rescue action, until the DOE investigation team has made its examination. (It may be necessary to impound equipment or articles until the examination can be initiated.
3. Photographing (color) of the accident scene; equipment involved in the accident, e.g., motor vehicles, ladders, tools, shipping containers, etc.; and transient evidence such as pool of liquid, spilled material, tire marks, etc., immediately following the notification of the accident. (Care should be exercised to avoid disturbance of the accident scene by the photographers.)

If there is a question as to whether the incident should be treated as a Type A accident, the scene is to be prevented until Laboratory management makes an official determination. In such an event one or more of the following shall be called:

1. A. M. Sessler
2. E. K. Hyde
3. G. L. Pappas
4. W. D. Hartsough
5. R. M. Latimer

Type "B" Accident

1. Estimated loss or damage to DOE or other property amounting to \$25,000 to \$99,999 where loss or costs are incurred for cleaning (including decontamination), renovating, replacing or rehabilitating structure, equipment or property.

2. Any vehicle transporting radioactive material that is involved in an off-site accident.
3. Any shipment of radioactive materials that arrives at the Laboratory damaged to the extent that there is substantial reduction in the effectiveness of the package.

Type "C" Accident

1. Any disabling occupational injury involving an employee.
2. Any DOE or other property damage or loss, resulting from fire or other accidental causes including accepted perils (e.g., wind, hail, flood, explosion, leakage) which exceeds the minimum dollar amount of \$500 except fire and explosion where minimum dollar amount is \$50.
3. Any motor vehicle accident involving a government-owned or leased vehicle for which the DOE accepts liability, including those obtained from an interagency motor pool.

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