

THE PREPAREDNESS POST

UTAH DEPARTMENT OF HEALTH
YEAR 5, ISSUE 3

Medical Reserve Corps: A Valuable Emergency Resource

By Charla Haley and Michelle Hale

When a disaster occurs, everyone expects to see the American Red Cross respond, ready to provide support and services. But, across the nation, in response to President George W. Bush's 2002 plea for Americans to offer meaningful volunteer service in their communities, there's another group of volunteers ready to help. The Medical Reserve Corps (MRC) is comprised of doctors, nurses, veterinarians, and others who can provide medical expertise in the event of a disaster or emergency.

The MRC was born following the September 11, 2001 anthrax attacks, when many medical and health volunteers offered their skills. These attacks demonstrated how valuable a more organized approach would be when using medical and health volunteers in an emergency.

The first MRC in Utah was created by the Bear River Health Department in 2002. The rest of the state soon followed suit, and now each MRC is managed by the local health department it serves. Although each unit is unique, most of the units supplement existing hospital, public health and emergency medical systems when they are overwhelmed.

In an earthquake, for example, as many as 85 percent of the people who flock to hospitals won't need urgent care. Medical Reserve Corps volunteers can help reduce

that surge. They can also help with public health education campaigns, flu shot clinics and, disease investigations.



When Hurricane Katrina hit in 2005, hundreds of health professionals arrived on-site to volunteer and support the relief efforts. Most of these well-meaning volunteers were told they had to wait to administer help until their credentials could be verified. For some, this process took weeks to complete. As the number of victims continued to rise, volunteer health professionals stood by, unable to offer their health care expertise to those in need ("Red Tape Delays Volunteer Doctors," Sept. 5, 2005, M. Marchione, *Associated Press*).

The MRC greatly reduces that problem. Identification, licenses, certifications and skills of MRC members are verified in advance. Criminal background checks are completed, and volunteers are trained, so that during a disaster, the volunteer can be quickly utilized and integrated seamlessly into the response. The advanced credentialing also means a health care professional can be utilized at his or her highest skill level.

You don't have to be a public health professional to volunteer. The MRC accepts non-medical volunteers who can fill important administrative support roles during an emergency response.

During the recent wildfires in Utah, the Medical Reserve Corps of Utah mobilized to help residents who were forced to flee the fires in

Continued on page 2

U-TRAIN

In this issue:

Medical Reserve Corps: A Valuable Emergency Resource	1
Utah Public Health Wildfire Response	2
Emergency Preparedness for Expectant Mothers	3-4
Testing the Waters	5
Training Calendar	6

Medical Reserve Corps: A Valuable Emergency Resource (continued)

Sanpete, Salt Lake, and Utah counties. The volunteers primarily helped people deal with smoke inhalation and get medication for chronic illnesses, as well as provided emotional support for the evacuees.

The deployment of MRC volunteers is authorized by the local health departments, and while requests may be submitted by anyone, they would likely come from first responders, including the local emergency manager, fire, EMS, or hospitals. There are 14 units across Utah, and about 1,000 volunteers who can provide additional resources to first responders.

If you'd like to learn more about the MRC, visit <http://www.utahmrc.org> for information and www.utahresponds.org to register and join.

Utah Public Health Wildfire Response

The Medical Reserve Corps (MRC) proved invaluable during the summer wildfires.

In Mount Pleasant, Central Utah's MRC was asked for EMTs and nurses to help staff the Red Cross shelter for the Hollow Fire. The Central Utah Public Health Department (CUPHD) was able to get nine medical MRC professionals and a few non-medical MRC to assist. CUPHD was also asked for assistance with public information.

Utah county's MRC was requested by CUPHD and the Red Cross to help with the fire response. The Red Cross thought it would need their fire rehab supplies (tents, fans, misters, water, granola bars, etc.) and the supplies were packed and ready to go but the need de-escalated.

Employees of the Southeastern Utah District Health Department (SEUDHD) helped staff the Emergency Operations Center (EOC) in Carbon and Emery counties. Regional coalition members relied on the Hospital Preparedness Program Regional Coordinator to keep them informed in case of a possible hospital or medical surge. The Emergency Response Coordinator (ERC) performed dual roles, helping as a Public Information Officer in the Joint Information Center (JIC) and keeping SEUDHD staff up-to-date on information so they could accurately answer the public's questions. The ERC also assisted in planning environmental health work with the Red Cross on the reception center/shelter.

Local health department ERCs from the Northern Region Type 3 Incident Management Team (IMT) helped in Carbon County, primarily relieving local EOC staff who had been working almost around the clock.

The county Emergency Operations Center in Southwest Utah Public Health Department asked public health to contact faith-based resources for assistance at the shelter in Leeds and New Harmony.

For the Alpine Fire, Utah County Health Department (UCHD) MRC nurses responded to the shelter on the 4th of July prepared to serve.

As you can tell, Utah's MRC response is always ready and willing to come to the aid of areas in need of medical and non-medical assistance.

Emergency Preparedness for Expectant Mothers

by Paulette Valentine
 Emergency Preparedness Director
 Southwest Utah Public Health Department



Having had three children myself, and also being a grandmother of six, my thoughts often turn to young mothers who are expecting and what special resources would be needed for them during an emergency. I am also concerned for the pregnant women who come into the health department for the Baby Your Baby and WIC (Women, Infants and Children) program and I feel the need to have good information for them. My hope is that anyone in this situation will see how vital it is for them to take personal responsibility and prepare in case of an emergency while they are pregnant.

My research has turned up some interesting and unique ideas for emergency preparedness and expectant mothers. Pregnant women are classified as "at-risk individuals" whose specialized needs are emphasized by the Department of Health and Human Services (DHHS) in their emergency preparedness and response activities.

Research studies conducted after disasters in the United States have shown that pregnant women have an increased risk for medical problems such as blood pressure disorders or anemia. Also, their infants may experience health issues, including low birth weight, shorter length, preterm birth, or smaller head size.

Before a disaster

Pregnant women should prepare as much as they can before a disaster strikes. This will help them to stay healthy and safe. They should follow these tips:

- Have a 72-hour kit.
- Let their health care provider's office (doctor, midwife or nurse practitioner) know where they will be.
- Make a list of all prescription medications and prenatal vitamins that they are taking.
- Get a copy of the prenatal records from their health care provider.
- If they have a case manager or participate in a program such as Baby Your Baby, let the case manager know where they are going. Plan ahead by giving a phone number to use as a contact.
- If they have a high-risk pregnancy or are close to delivery, check with the health care provider to determine the safest option for them.

During a disaster

These are some guidelines on what pregnant women should do if they need to evacuate because of a disaster or emergency.

- Bring their 72-hour kit with them.
- Bring any medications they are currently taking, including prenatal vitamins and prescriptions.
- Keep a copy of their prenatal medical records with them and contact information for the health care provider in case they need to visit another provider.
- If they are driving, stop to get out and walk every 1 to 2 hours.
- Wear comfortable shoes.
- Pack some snacks for energy.
- Remember that maternity clothes may not be available if they evacuate. Pack extra clothes, including undergarments.
- Rest often.
- Drink plenty of water.
- Stress is a risk factor for preterm labor (labor that occurs before 37 weeks of pregnancy). Women who show signs of early delivery (including frequent contractions) in a shelter should immediately go to the person in charge of the site and request medical care.
- If they have a high-risk pregnancy or are close to delivery, check with the health care provider to determine the safest option for them.

Continued on page 4

Emergency Preparedness for Expectant Mothers *(continued)*

To decrease stress:

- Go to a quiet spot.
- Clear the mind of worries for a few minutes.
- Take deep breaths from the belly, not the chest.
- Avoid getting overheated .
- Find someone to talk to a few times a day.
- Invite the person to be your "buddy."
- Have a 72-hour kit.
- Share any concerns about being pregnant in these difficult circumstances. Having someone to talk to is helpful all by itself.

Sites for reference:

www.cdc.gov/reproductivehealth/Emergency/index.htm
www.ncbi.nlm.nih.gov/pmc/articles/PMC1595278
www.thepregnancyzone.com/preparing-for-pregnancy/
<http://emergency.cdc.gov/disasters/pregnant.asp>
www.cdc.gov/reproductivehealth/Emergency/WildFires.htm
<http://emergency.cdc.gov/radiation/>



Preparedness Training information:

<https://www.utah.train.org>

Testing the Waters *By Nicole Lusher*

On Saturday, May 5, 2012, more than 2,800 individuals competed in the St. George Ironman competition. The grueling triathlon tested athletes' strength and endurance as they faced a 2.4-mile swim, a 112-mile bike ride, and a full 26.2-mile marathon.



The competitors started early in the morning at Hurricane's Sand Hollow Reservoir, while the efforts and preparation of Utah's EMS Strike Teams began days before. The Strike Team arrived on-site well in advance to begin the set-up of two full BLU Med hospital tents that would serve as a refuge and transition point for athletes needing attention after the swim and prior to the cycling.

Five minutes after the swimming portion of Ironman began, 40 to 45 mile-per-hour headwinds were clocked, creating 2-foot swells and major problems for the athletes. "This is the hardest race I've ever done," said Ben Hoffman, the winner of the 2012 IMSG. Another athlete, Meredith Kessler, reported "The swim—I thought I was going to end up on an episode of 'Lost'. Everyone had to deal with the tough conditions out there ..."

Utah Department of Health EMS Strike Teams and associated volunteers were up to the challenge and handled the chaotic conditions with poise and control. The Strike Teams saw a total of 108 patients, a substantial increase from the ten patients who were seen the year before. As athletes were coming in by the boatloads (and busload after an Ironman-staffed tent blew over), the team was able to provide quality care, communicate well with one another, and be flexible in adapting to rapidly changing circumstances. Despite the unforeseen adversities, the teams pulled together and made the best out of what could have been a disaster.



It was amazing to witness firsthand how well our Strike Teams worked! On behalf of all of the UDOH staff, we appreciate them representing us so well and for all of the hard work!



Calendar—2012 Training

Date	Event	Location	Information
SEPT. 24	Utah Public Health Information Officers	Southwest Utah Public Health Department 620 S 400 E St. George, UT	
SEPT. 25-26	Public Information Officer Conference (PIO)	Courtyard Marriott St. George, UT	http://www.utahemergencyinfo.com/go/doctype/2515/79903/ Utah PIO Association
SEPT. 25	2012 Utah Governor's Health Summit "Utah Solution: Bringing <i>Health</i> to Health Reform"	Grand America Hotel Salt Lake City, UT	http://www.utahsummit.com/
OCT. 2-3	Moulage for EMS Hosted by: UDOH, Bureau of EMS and Preparedness	Brigham City, UT	U-Train TBA
OCT. 25-26	2012 Zero Fatalities Safety Summit	Salt Lake City, UT	
NOVEMBER	Regional PIO Exercise Joint Information Center Information Sharing Hosted by: UDOH, Bureau of EMS and Preparedness	Regionally	U-Train TBA

Newsletter edited and produced by Charla Haley

UDOH Web sites:

health.utah.gov (main)

health.utah.gov/preparedness

health.utah.gov/ems



Utah Department of Health
Public Health Preparedness
3760 S. Highland Drive
SLC, UT 84106

MAILING ADDRESS:
P.O. Box 142006
SLC, UT 84114-2006