
Diagnostic Services – Department of Radiology – Diagnostic Division

SUBJECT/TITLE: DISASTER PLAN RADIOLOGY

PURPOSE: To document the procedure and to delineate the responsibilities to follow in the event of a full scale disaster or an ETC alert.

DEFINITION: None

POLICY:

Department of Radiology response to disaster is consistent with the UIHC Disaster and Emergency Preparedness Plan. Specific procedures for the Department of Radiology are defined below.

PROCEDURE:

1. After 5 p.m. weekends and evenings, the appropriate Disaster Call Tree will be initiated by the resident on call, after receiving notification from Hospital Operator, or ETC Charge nurse.
2. Disasters called between 8 a.m. and 5:00 p.m. M-F will be communicated to Radiology reception, who will initiate the appropriate call tree.

RESPONSIBILITIES:

1. Refer to hospital Disaster and Emergency Preparedness Manual for more detailed information.

<https://thepoint.healthcare.uiowa.edu/sites/administration/emergencymanagement/Lists/Emergency%20Operations%20Plan/AllItems.aspx>

2. Designated HICS Radiology Unit Leader will report to the Incident Command Center. HICS unit leader is defined in the hospital Disaster and Emergency Preparedness Manual.

Full Scale Disaster:

The Radiology Disaster Team is comprised of the following personnel:

- Department Executive Officer (DEO)

- Department Vice Chair, Operations
- All Technical Directors and Assistant Technical Directors
- Department Administrator

Refer to Department Disaster Call Tree for Contact Information.

The Radiology Disaster Team will meet in the 3JCP Scheduling room (3402) to coordinate activities. MRI (LL JCP) reception area will be used as a back-up location. All staff called back must “sign-in” on log sheet.

Initial activities of the disaster board will be:

1. Determine number and type of additional technical, support, and physician staff required. (3 technical / support staff per room).
2. Mobilization of portable X-ray units from: (as needed)
 - 1RCP
 - 3RCP
 - 4GH
3. Evaluate special imaging technical needs. (e.g., CT, Angio, U/S, Fluoro, etc.)
4. Assure adequate coverage of reception, image management, and transportation.

Back-up Plan:

In the event of a total (telephone, TV, radio) communication breakdown, all technical and support staff should report to 3JCP.

ETC Alert:

1. Radiology resident contacts either the 3JCP reception desk or technologist (depending on time of day). Coverage for all ETC imaging rooms (CT and general radiology) (2-3 staff each) should be achieved.