experts was conducted to investigate the appropriate fields for the use of emergency medical drones and the expected future applications.

Results: Currently, emergency patient support drones are being used to transport first aid equipment including an automatic external defibrillator, manage emergency patient status and on-site remote evaluation, and transport human organs during organ transplantation. Emergency medical drones for emergency patients are being developed, including systems that manage the patient's condition by applying additional advanced technologies. Conclusion: Emergency medical drones were classified into drones for transporting emergency patients and drones for emergency medical support according to whether emergency patients were on board. Drones for emergency patient support were being used to transport first aid equipment, manage emergency patient status and on-site remote evaluation, and transport organs during organ transplantation. The trend of air transport in the future is expected to change to a futuristic means of transportation in the form of emergency medical drones.

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Evacuating Premature and Critically Ill Neonates When Hospitals are Endangered by Disasters: A Case Study of the PANDA Team Evacuation of a Neonatal Intensive Care Unit During Severe Wildfires in Oregon, USA

Kathryn Leppold RN

PANDA Transport, Oregon Health & Science University, Portland, USA

Introduction: In September 2020, severe wildfires in Oregon (USA) came dangerously close to Hospital A. The entire county was under evacuation orders. The Neonatal Intensive Care Unit (NICU) at Hospital A needed to evacuate patients to other areas for safety, however the characteristics of premature and critically ill neonates required a specialized transport team. This presentation outlines a case study of how the Pediatric and Neonatal Transport team (PANDA), based at Oregon Health and Science University (Portland, Oregon, USA), responded to evacuate neonatal and infant patients to other metro area NICUs during the wildfires.

Method: Case study.

Results: During a six-hour period, both PANDA transport teams on shift were activated to complete back-to-back transports of neonates and infants by ground ambulance to fire safe locations. Each patient was transported by a PANDA Registered Nurse and PANDA Respiratory Therapist, with an Emergency Medical Technician who drove the ambulance and Medical Control available by phone. The PANDA team normally operates in non-disaster settings. This was the first time PANDA was activated to evacuate patients from a hospital during a disaster. This presentation will discuss lessons learned and implications for future practice.

Conclusion: Wildfire frequency and severity is predicted to increase due to climate change. Evacuation of premature and

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critically ill neonates requires a specialized transport team due to patient size, weight, and other considerations. Specialized transport teams should develop disaster evacuation workflows and resources, and regularly practice for these events. There is also a need for trauma-informed care in the post-evacuation setting to transport staff and parents of patients who were unable to travel with their child during transport. A full team pre-transport risk assessment is crucial in these circumstances.

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The Role of the Louisiana EMS Designated Regional Coordinator in Emergency Response During 2020/2021 COVID Pandemic and Hurricane Season Shayna Goldfine MPH, Nicole Volpi PhD

Region 1 Louisiana Department of Health, New Orleans, USA

Introduction: Post Katrina Louisiana's Health Department (LDH) used some of the Hospital Preparedness Program (HPP) funding to create a regional Emergency Medical Services liaison position entitled EMS Designated Regional Coordinators (EMS DRC). Regional EMS DRCs work with local pre-hospital agencies, hospital coalitions, and local/state/ federal counterparts during the preparedness and response phases of a disaster. This presentation explores the EMS DRCs role during the 2020/2021 COVID pandemic and annual hurricane season.

Method: The EMS DRCs were activated at the beginning of the COVID-19 pandemic. EMS agencies across the country were struggling to meet the call volume demand while balancing sick employees. The eleven LA Region 1 EMS agencies reached out to the EMS DRC for assistance. The EMS DRC coordinated with the LA State Health Department to provide surge ambulances to any ambulance agency in need. These units were utilized for COVID response, but once hurricane season hit in both 2020 and 2021 Surge ambulances were quickly transitioned to COVID and Hurricane response.

Results: During the initial COVID outbreak, 18 state surge ambulances were divided amongst four agencies. In 2020 Louisiana saw six named storms, one of which caused significant damage. After Hurricane Laura hit in 2020 the EMS DRCs managed 80 Federal surge ambulances stationed across 41 non-congruent hotel shelters. The 2021 COVID response brought another 21 Federal Surge ambulances to the region. Once Hurricane Ida hit that year over 60 surge ambulances got reassigned to six regional EMS agencies for COVID and Hurricane response.

Conclusion: The COVID-19 pandemic and subsequent hurricane devastation exposed gaps in EMS response capabilities to response. The EMS DRCs play a significant role in providing continuous care through working relationships with local, state and federal partners

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