# MULTIPLE MEDICAL EMERGENCIES IN THE BOLOGNA AREA: ORGANIZATION OF THE EMERGENCY SERVICE—FOUR REPORTS

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The area of Bologna, Italy has a particularly well organized system for the coordination of the medical emergencies. This unit is called "Bologna Soccorso", is located close to Ospedale Maggiore. It consists of the headquarters where the radio and telephone communications sytems are located along with 75 ambulances and other utility cars.

The headquarters are connected with hospitals, police, fire brigade, and motorway control posts by particular telephone and radio links. They are also connected directly with the main hospitals of the region.

In case of disaster, the information reaches Bologna Soccorso from the police, the fire brigade, etc. The Bologna Soccorso then carries out the recruitment of the staff, the recognition at the scene, and the dispatching of personnel and ambulances to the scene.

When the injured reach the Ospedale Maggiore, they are triaged and treated according to an internal institutional plan for mass admission.

The whole system has proven to be effective during the four major emergencies in Bologna's area in the last years: terrorist attack to the train "Italicus" (1974), 12 victims, 48 injured patients; derailment of the train "Freccia della Laguna" in Murazze (1978), 48 victims, 117 injured patients; terrorist attack to the railway station of Bologna (1980); 85 victims, 291 injured patients; and terrorist attack to the train "904" (1984), 15 victims, 193 injured patients.

## YOU CAN WRITE A DISASTER PLAN ON ONE SHEET OF PAPER

#### Douglas Lindsey, M.D., Dr. P.H., Tucson, Arizona, U.S.A.

Front: what everyone needs to know. Back: what a given individual needs to know. Poster presentation. The disaster plan of the University Medical Center, Tucson, Arizona, is used as an example. That plan, and one-sheet adaptations of it (both in English) are available for discussion with the author in German, Spanish, or Portuguese.

# HOSPITAL DISASTER PLANNING AND EVACUATION IN RELATIONSHIP TO NUCLEAR DISASTER: THE THREE MILE ISLAND LESSON

### J. Stanley Smith, M.D., Hershey, Pennsylvania, U.S.A.

Disaster planning and hospital evacuation in times of nuclear disaster is quite different from that in times of other natural disasters. As opposed to other forms of physical disaster, nuclear disasters can be of a "silent" type spreading radiation but not necessarily physical damage to a far greater area than the actual area of the nuclear incident. Due to the fear associated with radiation among not only the general populace but the medical community as well, a large exodus of medical care workers may occur in response to a nuclear incident exceeding the ability to care for the remaining patients. Because of this, it may be necessary to form disaster plans and evacuation plans for hospitalized patients, even in areas where there is no physical damage or detectable radiation.

This was especially borne out during the silent disaster at Three Mile Island Nuclear Power Plant and so contrasted with the physical disaster associated with the reactor explosion at Chernobyl.

### DISASTEROUS ALERT: KATASTROFLARM

### Karl-Axel Norberg and Sven-Erik Gornitzka, Danderyd, Sweden

In Sweden, fires and traffic accidents are not uncommon, but the risk for large accidents such as air crashes and chemical disasters is also imminent.

In small accidents, first aid can generally be given by ambulance personnel or at the casualty departments in hospitals. In large disasters, the great number of injured can make it necessary to provide first aid near the place of injury.

This video tape, which was produced for educational purposes, presents the medical disaster plan for