A disaster is a natural or human-caused event that significantly disrupts the environment of care, significantly disrupts care, treatment, and services, or that results in sudden, significantly changed or increased demands for the Medical Center’s services. When an event is deemed a disaster at the University of Toledo Medical Center, the need for additional resources will be determined as outlined in the University of Toledo Medical Center Emergency Operations Plan.¹

(B) Purpose of policy

This policy establishes a protocol for Patient Access to follow in the event of a disaster involving or calling upon additional resources at the University of Toledo Medical Center.

(C) Policy

I. In the event of a disaster, the University of Toledo Medical Center will utilize the Hospital Incident Command System (HICS) to coordinate essential services and assign basic responsibilities during disaster response.

II. Staff will not abandon the premises without permission from their direct Manager.
   a. During a disaster situation, all Hospital personnel and designated medical Center Personnel are considered essential to the operation of the Hospital and must report for emergency duty when needed and/or contacted.

III. The Manager will not excuse patient access personnel until otherwise directed by the Patient Access Director.

IV. The Patient Access Director will update the Patient Access Management team after coordinating and taking instruction from the Incident Commander.

(D) Procedure

I. Determining Registration Needs
   a. The Patient Access Director will be contacted or will contact the Incident Commander to make the determination of how many personnel will be needed from the Patient Access Department.
   b. The Patient Access Director will coordinate efforts to both retain needed staff and call in additional resources as directed by the Incident Commander.
   c. The Patient Access Assistant Director will notify the Incident Commander/Command Center of how many staff members are coming in.

II. Determining Scope of Registration Needs
   a. The Patient Access Director will determine location of Registration needs with the Incident Commander/Command Center to include, but not limited to:
      i. The Emergency Department
      ii. Points of Entry for victims of disaster
      iii. Points of care for victims of disaster

III. Registration of Disaster Patients: Treat & Release
   a. Disaster Patients being treated will be registered in the STAR A/D/T system for level of service being administered. Follow all departmental Standard Operating Procedures.
   b. If the STAR A/D/T system is down, follow the A/D/T System Failure Policy.2

IV. Registration of Disaster Patients: Admissions to the Hospital
   a. Disaster Patients being admitted to the Hospital will be registered in the STAR A/D/T system as they are in the normal course of care.
   b. Patients will be registered by the Emergency Department, PARU or the Admitting Department.
   c. The Emergency Department will assign the patient a Disaster Tag number. This tag number will be noted within the STAR memo screen.
   d. The Registration specialist will complete the registration with available family or EMS run sheet.
   e. The Registration specialist will present the patient and/or patient representative with the General Consent for Treatment.

V. Release of Information for Information
   In the event of a disaster, refer all inquiries regarding disaster victims to the Office of Communication: (419)383-4255.

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2 Refer to the A/D/T System Failure by Patient Access. Policy # 3364-132-08.
It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.