Fire Evacuation Plan for Outpatient Dental Sedation Clinic

University at Buffalo School of Dental Medicine, Buffalo NY

Research supported by The Department of Pediatric & Community Dentistry

Keturah L. Lowe DDS, Christopher M. Heard, MD, MBChB, FRCA



Background

We sought to developed a Fire Evacuation Plan (FEP) for University Pediatric Dentistry's sedation clinic, considering pertinent aspects of care gleaned from a literature review. A specialized FEP is necessary to address patients who are sedated, requiring monitoring and airway support during evacuation.

After performing a literature review of five articles outlining guidelines for emergency evacuation of outpatient sedation and surgical clinics, we identified relevant guidelines necessary for safe discharge of patients and formulated an initial FEP. The FEP is specific to our local climate, as well as our staff and clinic layout. Evacuation timing is based upon three group assignments and patients' level of sedation at time of evacuation

GROUP 1 Front Desk Staff atients/Escor **Dental Students** assigned to Visiting Observers Dosing Room prior **Group 1 Patient** to IV placement, nedication Exit at sound of alarm at Door 1 in the Waiting Room **Meeting Point Parking** and walk to 1091 Main Street Lot East 1091 Main East Entrance on to Paul Mall N Street Street (See Diagram)

GROUP 2 Assigned to **Group 2 Patients** Patients/Escorts In dosing room prior with IV placed or Oral sedation

Patients/Escorts in Recovery nedication give

If the alarm continues for 5 mins or if an active fire is suspected, Group 2 will relocated to Staging Area A The corridor to UPD Exit Door 3 and wait for instructions to evacuate from Dental/Anesthesia Attending

Exit Door 3 onto Main Street and turn right to meet in front of Church

At the sound of alarm, Sedation Staff should request equipment from Nurses

- · Portable Pulse Oximeter
- Oxvgen Tank
- · Airway Box
- · Aluminum Blanket during inclimate weather

Any patient requiring oxygen is considered to be Group 3 and may not exit with Group 1 or 2

> **Once at Meeting Point Sedation Staff should** contact Outside hold off sedation until "all clear". If Administrator to give sedated, the Dental Attending attendance and patient status treatment as quickly as possible

GROUP 3 (Dental & Anesthesia)

Patients in

Surgical

Operatory

tients/Escorts

in Pre Op or

Recovery that

require oxygen

 Portable Pulse Oximeter Oxvgen Tank

Nurses

and turn right to meet Group 2 in

front of the Church next door.

- equipment for each patient
- · Anesthesia "T" Piece with Facemask

Inside Administrator and Sedation Staff

should instruct Nurses to supply emergency

- · Emergency Airway box, and Sedation Staff Ambubag **Dental Assistants** Reversal Agents in AIRWAY Box
 - Flumazenil, Naloxone The BE40 Monitors with Battery Backup

Once at Meeting Point Sedation Staff should contac **Outside Administrator to** report attendance and patient status. Patients that require additional support will be

transferred by ambulance to

Outside Administrator

Exits with Group 1, remains in contact with Inside Administrator, keeps record of all patients. escorts, and staff

Inside Administrator

Determine the need for evacuation of Group 2 and 3, coordinate flow of evacuation. distribution of emergency supplies, reassign roles as needed, and keep Attendings updated,

Front Desk Staff

Assist and evacuate with Group 1. If there is only one Administrator. function as Outside Administrator.

Sedation Staff (Residents)

Remain with patients and escort. evacuate with patients according to group or remain in clinic if role reassigned by Inside Administrator

Medical Assistant

Evacuate with patient and assist that group. If not with a patient, assist with the relocation and evacuation of Group 2 and Group 3

Nurses

Distribute Emergency Supplies to Sedation Staff in Group 2 or 3, assist with relocation and evacuation of Group 2 and 3

Emergency Airway Supplies

Airway Box

 Ped/MED/Adult Facemasks

- Needles X3
- Naloxone X1 Flumazenil X1
- MAD Device X3

Oral Airway Box (50-90)

Ambubag

Pediatric and Adult

(Choose appropriate size)

Portable Oxygen

Pulse Oximeter

MISC

· Evacuation Bag (for equipment and paperwork)

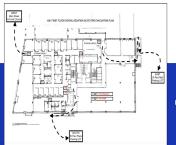
No

Equipment

Required

- Aluminum Sheets for inclement weather
- IV Pole attached to Chair

DIAGRAM



Once a decision has been made by the Attendings (Dental/Anesthesia) and Inside Administrator Group 3 will exit Door 3 onto Main Street and turn right to meet Group 2 in front of Church

Future Plans

We intend to present the Fire Evacuation Plan to staff in a formal lecture and perform a drill based on predetermined patient scenarios. A pre and post test will be given to each staff to establish baseline knowledge of emergency procedures and learned protocol. The Fire Plan will be adjusted as needed. The lecture, tests and drill will reoccur annually.

