

	Quality Management System Procedure		
	Title: SOP OF Disaster Management		
	Document Number - AH-HUZ/SOP/DM/02/2025		
	Issue Number - 03		
	Effective Date – 01. OCT.2025 to 01.OCT.2026		
Reviewed and Approved by: Dr.N.Narayana Reddy  Signature -			

1. Purpose:-

- To provide policy for response to both internal and external disaster situations that may affect hospital staff, patients, visitors and the community.
- Identify responsibilities of individuals and departments in the event of a disaster situation.

2. Scope: It includes:

- Establishing a command nucleus.
- Arrangement of temporary disaster wards.
- Triaging of patients.
- Treatment to patients.

3. Standard Procedures

S.No.	Activity	Responsibility	Related Format
3.1	Disaster Management: A Command nucleus is established at the Assembly point which is manned by the MS/MOIC/ADMO CMO/DCMO .		
3.1.1	Call regarding any disaster will be taken at the registration counter in the Emergency department. Any call regarding disaster that has occurred, has to be verified.	Emergency Medical Officer	
3.1.2	Once the verification is done, the entire hospital to be put on alert through siren/ buzzer/ mass call system / public addressal system etc.	Emergency Medical Officer	
3.1.3	All department heads are informed and they can call other specialist doctors, nurses, technicians and paramedical staff.	Department Heads	
3.1.4	The spokesperson will distribute disaster cards (written work instruction) to the doctors, nurse, dietitian, security guards, pharmacist, and ambulance driver.		
3.1.5	Ambulance to be kept ready and will leave after getting the work instruction.		



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3.1.6	Beds to be vacated, all impending, cold cases posted for next day surgery cases to be discharged to make beds available.	Department Heads	
3.1.7	Security guards to be instructed to cordon off to create temporary disaster wards.	ADMO (Med) CMO/DCMO	
3.1.9	Pharmacist is called to supply drugs to the disaster victims.	ADMO (Med) CMO/DCMO	
3.1.10	Blood Bank In charge is called to provide O-blood to the disaster victims.	ADMO (Med) CMO/DCMO	
3.1.11	Dietetics department to be alert to make food arrangement for the victims.	Matron	
3.1.12	Disaster cupboard (2- 3) depending on the disaster envisaged to be kept ready.	Emergency Medical Officer	
3.1.13	As patients arrive, the triaging of patients should take place with the help of tags which can be red, Orange, green and black.	Emergency medical officer	
3.1.14	Bodies will be stored in a designated place by Security.	Security guard	
3.1.15	After bodies have been identified, the information will be filed on the Disaster Tag and Medical Records notified as to the identification of the patient.	HR personnel	
3.1.15	The bodies will be handed over to the relatives after proper identification in presence of representatives from the police department	HR personnel	
3.1.16	Bodies which remain unclaimed will be handed over to the police after following the required procedures		
3.2	Responsibilities of Individuals and Departments:		
3.2.1	ADMO (M) CMO: In a major disaster will do the following functions: 1. Check with local authorities to verify the disaster and obtain additional information. 2. Authorize announcement of disaster to		



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	<p>hospital personnel.</p> <ol style="list-style-type: none"> 3. Ask for help from local police and volunteer organizations as deemed necessary. 4. Stay in the area of administrative offices to be available to assist. 		
3.2.2	<p>Nursing:</p> <ol style="list-style-type: none"> 1. Is responsible for notifying all department heads or alternates. 2. In a major disaster be responsible to see that families of victims are notified as soon as possible. These calls may be made by the physician who treats the victim or nursing in-charge or her designee <ul style="list-style-type: none"> o The Command Center in-charge will coordinate these efforts and notify Medical Records personnel as to when information can be released to the press. 		
3.2.3	<p>Nursing In-charge:</p> <ol style="list-style-type: none"> 1. Is responsible for determining the extent of the disaster, whether it is a "major" or a "minor" disaster. If it is a major disaster, then the CDMO CMO, ADMO (M) DCMO and Matron will be notified (if not present at time of disaster). 2. Will set up a Command Center - All department heads would report in to the supervisor before going to their departments. 3. Will attempt to find adequate numbers of nursing personnel. Have them keep a list of those notified. 		
3.2.4	<p>Admitting Office</p>		



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1. Assign responsible person to switchboard as soon as possible.
2. Department head or designee will call in their own personnel as needed after having reported to the Command Center.
3. Do not accept routine non-emergency admissions.
4. Refer all enquiries and press to desk in Reception Area.
5. Assign an admissions person to aid with discharge of hospital patients from the wards, if requested by Medical Team.

4.0 Formats: (Enclose in appendix)

S. No.	Format No.	Format Name	Type
1.	FF/DM/01	Format for disaster drill	Forms

5.0Format for disaster drill

S.N	Event	Yes/No	Actual time of occurrence
1	Mock Drill start time		
2	Call for emergency received at		
3	Code Orange Announced		
4.	Code Orange team activated		
5	Equipped ambulance sent to the site of disaster.		
6	Normal admissions are stopped immediately		
7.	Command nucleus activated		
8.	Team reported at command nucleus		
9.	Disaster card distributed		



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10	Pre defined area for creation of disaster ward evacuated		
11	Disaster ward created		
12	Medicines & other consumables reaches the disaster ward.		
13	Security controls the crowd		
14	Reception desk positioned at the main entrance of the hospital		
15	Patient identification by the designated team member done		
16	First patient reported		
17	Triaging Done		
18	Patient shifted to ICU/OT		
19	Patient shifted to disaster ward		
20	Patient discharged by		
21	Media handling done by spokes person		
22	Blood bank in charge reported at the command nucleus		
23	Dietician Reports at the command nucleus		
24	Store in charge reports at the command nucleus		
25	Pharmacy in charge reports at the command nucleus		
25	Code Orange called off at		

Triage Chart:





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