

**APPENDIX D**  
**MEDIA SCRIPTS**

- "Why Plan?"
- "This Is Liberty County"
- "McHenry County Emergency Medical Service Functional Annex"



## "WHY PLAN?"

### SUMMARY

This 17-minute 3/4-inch video tape uses news footage from actual emergencies to demonstrate the need for an emergency plan. Before showing the footage, ask participants to look for examples of the following planning issues:

- Policy decisions (made before or during any disaster),
- Types of organizations (that respond to emergencies),
- Kinds of skills (required for that response),
- Resource shortages (that become evident during emergencies),
- Coordination (within and among responding organizations), and
- Impact of disasters (upon individuals and communities).

After the news footage is shown, segments of it are reviewed as examples of the steps for developing an emergency plan. These steps provide an outline of the course and include:

- Conducting a **fact gathering** study,
- Deciding on a **plan format**,
- Experiencing the **planning process**,
- **Basic plan development**,
- **Annex development**, and
- **Exercising**.

### VIDEO

### NARRATION

FEMA LOGO

"WHY PLAN?" (title)

What you are about to see is a montage of news footage depicting actual emergencies. As you view this tape, take note of the issues that answer the question, "Why Plan?"

### PLANNING ISSUES

POLICY DECISION

TYPES OF ORGANIZATIONS

KINDS OF SKILLS

RESOURCE SHORTAGES

COORDINATION

IMPACT OF DISASTERS

Look for the **policy decisions** that are made before or during any disaster. Notice the **types of organizations** that respond to emergencies as well as the **kinds of skills** that are required for that response. Look for examples of **resource shortages** and illustrations of the need for **coordination** within and among **organizations**. Finally, note the devastating **impact** that **disasters** have.

(Montage of news footage.)

## CLASS DISCUSSION

(Repeat planning issue list.)

The following synopsis of the news clips provides examples of each planning issue you have discussed.

(List each issue separately.)

As you have seen, if you follow these steps, you will be better prepared to be a leader in developing an effective emergency plan in your own community. As you become that leader, there may be those who ask the question, "Why plan?" The answer is clear. Disasters release enormous amounts of energy in short periods of time. Therefore, they require coordination of personnel and equipment beyond that of normal, day-to-day situations. Without an emergency plan, a community does not possess the perseverance, skills, and knowledge that are required to efficiently save lives and protect property in the face of disaster.

## **"THIS IS LIBERTY COUNTY"**

<u>SLIDE</u>	<u>NARRATION</u>
1. Black	<hr/>
2. Title shot: "This Is Liberty County"	(Music up.)
3. Chairman standing near desk	Welcome to Liberty County. I'm Jim Perry, chairman of the Board of Supervisors of Liberty County. I appreciate this opportunity to introduce you to our community.
4. State of Columbia map with Liberty County highlighted	As you can see, Liberty County is located in the south central portion of the state of Columbia. Our county has a population of over 275,000, which is slightly above the average for counties in our state.
5. Liberty County map	The sixteen hundred square miles of Liberty County includes a number of towns and villages, with the county seat located in our largest jurisdiction, Central City.
6. Two intersecting interstate highways	Liberty County is a major transportation center for the state of Columbia with Interstate Routes 101 and 107 intersecting just south of Central City.
7. Rail yard	Our county is also a major rail center and is served by the Great Atlantic and Pacific Railroads.
8. Airport	The Liberty County Regional Airport is served by two airlines that provide direct flights to Washington, D.C.; New York; Atlanta; Denver; and Los Angeles.
9. Industrial park sign	Because of this fine transportation network, a broad industrial base has been developed throughout the county.

- |                                      |  |
|--------------------------------------|--|
| 10. Chemical plant                   | Along with being the headquarters for a number of industries, Liberty County is also home for a chemical plant that produces a variety of household and industrial products.               |
| 11. Agricultural shot                | Our rich farmlands have led to a strong agricultural industry as well.   |
| 12. Two-way split: dairy/orchards    | Liberty County's dairies and orchards yield products that are distributed throughout our entire region.  |
| 13. Mine entrance                    | Our abundance of natural resources has also led to a thriving mining industry that has brought us national prominence.   |
| 14. Two-way split: basketball/hockey | Although industry is important to us, Liberty County's citizens are not all work and no play. Our convention center is host to both a semi-professional basketball team and a hockey team. |
| 15. Orchestra                        | The center is also used by the Liberty County Regional Orchestra, as well as by other county civic organizations.  |
| 16. Canoe in stream                  | Our county park system also provides ample opportunity for recreation. (Music out.) This picture, however, reminds me of your purpose for learning about our county.                       |
| 17. Stream after flood               | Two years ago, the force of Tropical Storm Edward did this to our quiet streams.   |
| 18. Lightning over city              | The storm taught us to take emergency preparedness seriously, but we learned our lesson the hard way. The torrential rains of Edward resulted in 28 deaths and 656 injuries.               |
| 19. Flood with Citgo sign            | Because of the accompanying flooding, 75,000 people had to be evacuated from the low-lying areas of the county.  |

- |   |   |
|---|---|
| 20. Emergency program manager at desk                                 | In the aftermath of Tropical Storm Edward, Mary Smith was appointed as our emergency program manager. She will be sharing with you how the state of preparedness in Liberty County is being dramatically improved.  |
| 21. Mock pamphlet: "Hazard/Vulnerability Analysis for Liberty County" | I began my work as emergency program manager by conducting a hazard/vulnerability analysis of the county. I believed that such an analysis would identify potential natural and manmade hazards and suggest some proper responses to the threats they posed.                |
| 22. Flood plain map   | Our vulnerability to flooding was clearly seen by examining maps, such as this, that illustrate the flood plain.  |
| 23. Hurricane   | Since our county is located near the coast, we are also subjected to hurricanes and tropical storms about once every five years.  |
| 24. Tornado   | Tornadoes are another natural hazard to which we are vulnerable. At least one tornado has touched down in Liberty County every decade.  |
| 25. Fault-line map  | There is even the possibility of earthquakes in our area since the Lake Borne Fault Line and the New Madrid Fault Line bisect the county.   |
| 26. Tank farm   | Among our potential manmade hazards are those involving petroleum since a large storage area is located in Central City.  |
| 27. Railroad tank cars  | Accidents relating to transporting hazardous materials could also pose major problems and require rapid evacuation.   |
| 28. Earthen dam   | Some manmade hazards are not so clearly identified. The East Lake Dam, which seems so much a part of our natural surroundings, is one example. The Corps of Engineers recently inspected the dam and the report is being studied to determine the extent of needed repairs. |

- |  |   |
|--|---|
| 29. Nuclear power plant  | Our nuclear power plant also possesses some potential for problems. Indeed, several recent incidents have raised public concern.  |
| 30. Demonstration  | This concern has led to the formation of Mothers and Children Against Nuclear Energy, a group that has held a number of demonstrations near the plant.  |
| 31. Mushroom cloud   | The ultimate manmade hazard is something we don't like to think about, but which must be addressed. Liberty County includes both high hazard and reception and care areas. Therefore, we are developing population protection plans for both contingencies.                   |
| 32. Emergency program manager at map                             | During our hazard/vulnerability analysis, we discovered that no matter what type of hazard—natural or manmade—we have many vulnerable areas.  |
| 33. Mobile home park   | For instance, the increase in the cost of housing has created numerous mobile home parks that provide less protection from high winds and flood waters.   |
| 34. Four-way split:<br>hospital, school,<br>prison, nursing home | Our hospitals, schools, prisons, and nursing homes pose unique problems if a major evacuation should ever be required.  |
| 35. Traffic jam  | And industrialization has created a concentration of commuter traffic at specific times. This, of course, complicates warning procedures and can tie up evacuation routes.  |
| 36. Basic Emergency Plan   | The findings from our hazard/vulnerability analysis showed that our community needed a basic emergency plan. Creating such a plan meant that we had to combine the expertise of local government and the private sector along with resources from state and federal agencies. |
| 37. Integrated Emergency Management System                       | We believed that our plan would help us create an integrated emergency management system. This would provide for the four phases of emergency management that exist no matter what the emer-  |



gency and would lead to important mutual aid agreements between Liberty County and Central City.

38. Six-way split:  
emergency medical  
service personnel,  
police officer, fire-  
fighters, man with  
bullhorn, activated  
emergency operating  
center, nurse

To produce our basic emergency plan, we formed a committee composed of a cross section of people dedicated to improving emergency services.

39. Man in front of  
equipment

(Sound effect at construction site.) Since Mary Smith knew I was a volunteer firefighter and that I was interested in our community, she asked me to represent the construction companies of our county on her committee.

40. Meeting

To tell you the truth, I was skeptical about how I could help. There were people at those committee meetings that had a lot more experience than I do—like the Central City Fire Chief, the Director of the Department of Public Works. There was even someone from the state emergency management agency.

41. Man pointing to  
equipment

But I knew I was needed when I realized that equipment like ours could be valuable in emergencies. So when we developed a detailed list of resources, we included construction equipment. The county couldn't purchase and maintain such equipment for the few times it's needed, but it can quickly locate ours almost anywhere in Liberty County.

42. Caterpillar with tree  
trunk

Like after a recent windstorm, our front-end loaders were used for cleanup. The time required for recovery from that disaster was much less than normal. (Sound effect out.)

43. Emergency medical  
service person near  
rescue vehicle

(Sound effect: mid-size city traffic.) The emergency medical service in Liberty County was in a state of disarray before the committee began its work.

44. Two-way split:  
hospital/ambulance

Although we have enough hospitals and medical transport equipment, we needed a plan that would coordinate our response to emergencies.

45. Emergency medical service person (closeup) We're still working on spelling out responsibilities among all the EMS organizations, but already Liberty County's emergency medical services have been greatly improved. (Sound effect out.)
46. Woman with Red Cross pin I was one of the people on the committee representing the Red Cross, church groups, and other volunteer organizations, I wanted to be sure that we could react better than we did during Tropical Storm Edward.
47. Shelter with people So, one of our priorities was to include in the resource list the names of volunteers—people who can be shelter managers, counsellors, nurses, food service helpers, and the like.
48. Reporting table with Volunteers of America Emergency Team member We also tried to clarify our roles and determine how each of the volunteer organizations could best be used. We don't want one group trying to outdo another—there's no room for competition when it comes to serving those who are victims of disasters.
49. City manager seated at desk I'm Bruce Caldwell, the city manager of Central City. When Mary Smith's committee was being formed, Jim Perry asked me to help.
50. Fire engine at scene From our past experiences, it was evident that a solid relationship between Central City and Liberty County was imperative. Only through such cooperation are we able to provide the quality of protection the citizens of Central City deserve during an emergency.
51. EMC chart/diagram As we worked on our emergency plan, we discovered that there are functional groups that exist in any emergency management organization. These groups include policy, coordination, operational response, and field response. Each functional group has a unique purpose and uses specific personnel. When our plan is completed, it will reflect this important discovery.
52. City manager at desk Presently, the plan is like anything that's alive. It's changing. Although change is usually difficult, we know that this one is for the better. Actually, we've begun an improvement process—thanks, in large measure, to Mary Smith and Jim Perry.

53. Chairman seated at desk

We certainly thank you, too, Bruce, for all you've done. And thank you who have come with us on this tour of Liberty County. Like your communities, ours has not reached perfection either. But we are striving for it and believe we've made a good beginning. We are proud to have had you here with us and to be able to say this is Liberty County!

54. Opening four-way split without title words

(Music fade.)



**McHENRY COUNTY**  
**EMERGENCY MEDICAL SERVICE FUNCTIONAL ANNEX**

<u>SLIDE</u>	<u>NARRATION</u>
1. Black	_____
2. Ambulance	(Siren)
3. Responders carrying stretcher	No community is immune to a disaster that could cause mass casualties—disasters, such as . . .
4. Tornado	tornadoes;
5. Flood	floods;
6. Building collapse	explosions or the collapse of buildings;
7. Injured person in trench	cave-ins or other entrapments;
8. Airplane crash	aircraft incidents;
9. Overturned truck	hazardous materials incidents, which may include toxins, chemical agents, or radioactive materials;
10. Firefighters on ladder in smoke	and fires—a danger in themselves and a frequent accompaniment to other disasters.
11. Rescue vehicle and fire truck at scene	These and other disasters that result in mass casualties can tax the emergency medical system's operation in any local jurisdiction.
12. Victims on ground	Whenever mass casualties occur, orderly categorization and treatment of victims must be established.
13. Car accident rescue	Emergency medical personnel must approach each situation in a logical, objective, and organized manner.

14. Title  
It is to serve these goals that the McHenry County Emergency Medical Service Annex was developed.
15. "Produced by . . . ."  
This presentation was produced by McHenry County Emergency Services and Disaster Agency and McHenry and Western Lake County Emergency Medical Services.
16. OPERATION UPDATE  
OCTOBER 9, 1977  
As a result of Operation Update, a countywide disaster drill held on October 9, 1977, the McHenry County Emergency Medical Service Annex was developed and proposed for managing medical activities created by large-scale emergencies.
17. GOAL—SAVE LIVES  
LIMIT CASUALTIES  
Its goal is to provide for effective organization that would save lives and limit casualties in a disaster situation. This annex is not compulsory for any individual department, but it is intended to become standard operating procedure whenever a number of departments are called into a mass casualty situation.
18. MCHENRY COUNTY ESDA,  
etc.  
The annex is the product of a committee that was composed of representatives from the McHenry County Emergency Services and Disaster Agency, the State of Illinois Emergency Medical Services, local fire and rescue departments, hospital, and mobile intensive care units.
19. Committee members' list  
Committee members included: chairman, John Shay; co-chairman, Molla Haggan; and Fire Chiefs Lester Macko, Phil Freund, and Richard Menzell.
20. List continued  
The committee also included medical personnel: George Gallant, Kathleen LaGreca, and Elvera Boswell, along with rescue representatives, Don Zicker and Art Erickson.
21. DOES IT WORK?  
Does this annex work?
22. "Victim" in bus window  
The results of local mini-drills indicate that it does. Let's take a look at how the annex would be implemented in an emergency.

23. Dispatcher  
Upon notification of a disaster, the dispatcher directs emergency medical, police, and fire services to the scene.
24. Police car  
Police are commonly the first to arrive at the scene. A brief size-up of the situation should be made and relayed to all other responding units.
25. ESDA and definition  
The dispatcher also notifies ESDA—the Emergency Services and Disaster Agency. ESDA is charged with the responsibility of emergency management and coordination.
26. COMMAND POST  
Because many emergency teams will be arriving on the scene, essential communications and command post will be necessary to coordinate the efforts of all the agencies responding. It is the responsibility of the first fire-rescue department on the scene to establish a command post.
27. ESDA communications van  
Within ten to 30 minutes of notification, ESDA will provide a communications van to serve as a formal command post.
28. Personnel near van  
The command post must be easily accessible to all personnel and be located in the area that affords the most efficient control of triage. In order to serve as the focal point for all operations, a command post must also be noticeably marked.
29. Graphic: green light and flag  
This is accomplished by using either an orange flag during the day or a flashing green light at night, or both.
30. Fire, EMS, and other personnel  
All emergency operations are controlled through this command post and every agency incidental to the disaster scene should have a liaison assigned to it. Interagency communication and cooperation are of major importance in any disaster situation. It is vital that police, fire-rescue, and ESDA personnel work together. By having key personnel from each agency assigned to the command post, this cooperation can be accomplished.

- |   |  |
|---|--|
| 31. Hand-held radio with words                | Radio contact is established and maintained through the command post with the trauma center, ESDA, and the police, fire, and rescue agencies involved.   |
| 32. Graphic: bullhorn and hand-held radio     | On-scene communication is established and maintained by radio, bullhorn, or public address system.   |
| 33. ESDA van and other vehicles               | Even though command posts may differ physically, their function remains the same—to serve as a vital link in the interagency communication that is necessary for effective command, control, and coordination.   |
| 34. Chain of Command                          | What is the chain of command at a disaster scene?  |
| 35. Chief Executive Officer                   | The legal responsibility for on-scene management rests with the chief executive officer of the governing board . . .   |
| 36. Chairman of the Board/<br>Mayor/President | . . . whether it be county, city, or village.  |
| 37. ESDA DIRECTOR<br>COORDINATES:             | The local ESDA director is responsible for coordinating all activities of county, state, and federal agencies with those of local agencies. He may also assume total responsibility if the chief executive officer is not available or if asked to do so by the chief executive officer. |
| 38. FIRE CHIEF<br>CHIEF MEDICAL COORDINATOR   | The individual in charge of on-scene safety is usually the fire chief. He, in turn, appoints a chief medical coordinator, usually a paramedic.   |
| 39. Chief Medical Coordinator                 | The chief medical coordinator is the administrator of all on-scene medical operations. He coordinates the interagency efforts of all emergency medical teams.  |
| 40. Sign: McHenry Hospital                    | The chief medical coordinator is stationed at the command post, establishing radio communication between on-scene operations and area hospitals on the emergency radio frequency.  |



41. A. LOCATION  
B. NATURE  
C. EXTENT AND TYPE  
D. APPROXIMATE  
NUMBER
42. COMMUNICATION  
BETWEEN . . .
43. Dispatcher
44. CHIEF MEDICAL  
COORDINATOR . . .
45. TRIAGE OFFICER
46. EMS, rescue, fire  
personnel
47. Rescue worker giving  
first aid to triaged  
victim
48. Writing on tourniquet
49. Triage defined
- The chief medical coordinator ensures that the area trauma center at McHenry Hospital has been notified of the disaster location, the nature of the disaster, the extent and prevalent type of injuries, and the approximate number of casualties.
- He requests from the trauma center information on the availability and capabilities of other hospitals. He ensures that adequate medical supplies are available or are being brought to the scene and that METTAGS are being properly utilized—this includes the listing of all medical treatment given at the scene. He also has the responsibility of requesting additional medical teams when so directed by the on-scene manager.
- The trauma center is responsible for notifying all other area hospitals and establishing interhospital communication through the EMS touchamatic phone.
- The chief medical coordinator will appoint a triage officer, an area staging officer, and a transportation officer.
- The triage officer will receive a size-up from the emergency agency that was first on the scene.
- This size-up should include the approximate number of persons injured and the sector in which most of the severely injured seem to be located.
- The triage officer and primary triage team will be the first medical personnel to actually contact the victims. Their main function is to assess and to categorize, rather than to treat.
- They should be familiar with the METTAG system and thoroughly understand the triage classification system.
- Triage refers to the sorting of multiple casualties into priorities for emergency care or for transportation to definitive care. The triage criteria established for this emergency medical service annex are based upon the approach that sometimes, in cases of mass casualties, it becomes necessary to

bypass treating less seriously injured victims in order to ensure the highest survival rate possible.

50. METTAG SYSTEM

The medical emergency triage tag, or METTAG system, is a system utilizing a specially designed triage tag.

51. Shot of METTAG

This tag is designed to be universally recognized so that hospital, ambulance, and other emergency personnel can quickly understand the victim's condition and act accordingly. The METTAG system is a simple, universal system for rapid patient categorization or triage.

52. Four-way split: dagger,  
rabbit, turtle,  
ambulance crossed out

The triage tag indicates one of the four classifications of priorities. Class 0—black in color; symbol, dagger—indicates the lowest priority. These victims are deceased and will be moved at the direction of the coroner.

Class 1—red in color; symbol, rabbit—indicates the highest priority. These victims are critical. Their survival depends on immediate emergency care.

Class 2—yellow in color; symbol, turtle—indicates the second or delayed priority level. These victims may need treatment prior to transportation but do not need immediate care in order to survive.

Class 3—green in color; symbol, X over ambulance—indicates the third or minimal priority classification. This classification is composed of two different victim categories: one, victims who appear to be uninjured and need only observation; and two, victims with fatal injuries whose chances of survival are improbable even with ideal medical care. Emergency transportation for these victims is not considered necessary.

53. Emergency personnel  
and victim

All patients should be tagged even if deceased. The tag should be affixed to the victim's body and not to clothing. The classification stubs are then removed to leave the appropriate priority color. Any additional information that may be vital to the patient's care is then added to the tag. The stubs that are removed from the triage tag should be retained by the triage officer.

54. Closeup of METTAG

The yellow corners of the triage tag are used by the transportation officer for patient control. The triage tag remains attached to the patient until removed by the hospital staff. After initial triage,

- patients will be transferred to the disaster staging area.
55. **DISASTER STAGING AREA OFFICER** The disaster staging area officer has the responsibility of control and operations in the disaster staging area.
56. **Rescue squad personnel** Incoming medical teams should report to the staging area officer. No medical team should freelance into the disaster area. The disaster staging area officer will assign medical teams to the patient removal area, direct patient care by priority, and order the removal of patients in a proper priority sequence.
57. **Stretcher being carried** As patients are brought to the staging area, they are placed in three separate areas corresponding to the three triage classifications of red, yellow, or green. A triage physician will be dispatched to the scene from the trauma center.
58. **Triage MD arriving** This physician should be a doctor who is assigned to an emergency room and preferably a specialist in emergency medicine. He should be transported to the scene by some emergency vehicle and should bring additional disaster supplies with him if they are necessary.
59. **Graphic: green hardhat** The triage physician should be easily identifiable and, therefore, will wear a green hardhat.
60. **Triage MD** Upon arrival at the scene, the triage physician will report to the chief medical coordinator at the command post. After he is briefed, he will assume control of patients in the staging area and request a report from the disaster staging area officer.
61. **MD with victim** The triage physician has the responsibility of direct patient care and treatment. He will also perform secondary triage at the staging area.
62. **Victim in carrier** He will note on the triage tags any treatment or medication given to the patients. The triage physician requests additional help, equipment, or supplies through the chief medical coordinator at the command post.

63. **TRANSPORTATION OFFICER**                      The transportation officer controls the incoming and outgoing mobile intensive care units, logs vital information, and controls the patient load imposed on each hospital.
64. **Parked rescue vehicles**                      If the chief medical coordinator and the staging area officer are not prepared to accept multiple mobile intensive care units at one time, the transportation officer will determine a holding area away from the disaster site. Mobile intensive care units should be controlled so that efficient access and egress from the staging area is accomplished.
65. **Many vehicles on scene**                      Should the transportation officer not maintain good control, the result will be confusion and traffic congestion.
66. **Checkpoint**                                      As mobile intensive care units leave the scene, they are stopped at the transportation officer's checkpoint. The purpose of this is to log information and direct the driver to the proper hospital. This information will be forwarded to the command post that will then notify the hospital.
67. **Nurses with patient**                              As patients arrive at each hospital, it becomes the responsibility of the emergency room personnel to triage.
68. **MD and nurses with patient**                      Emergency room personnel also assign treatment to the patients as each hospital's capabilities are stressed.
69. **Hospital personnel with patient**                      The hospital should update the command post, which will, in turn, notify the transportation officer.
70. **Police officer**                                      Police agencies in the area of the disaster, in coordination with the command post will be directly responsible for traffic control.
71. **Police officer and patrol car**                      Police agencies will also be responsible for security on the scene and at its perimeter.

- |                               |  |
|-------------------------------|--|
| 72. Police directing traffic  | It is essential that police maintain easy accessibility to the disaster site for emergency vehicles only and direct authorized personnel to the correct areas of the disaster site.          |
| 73. Police with victim        | Police will also provide security at the disaster site and take charge of the collection, identification, and custody of the victims' personal property.                                     |
| 74. Police at ESDA van        | It is imperative that the police commander in charge be assigned to the command post to serve as a liaison for operations.   |
| 75. Fire chief                | The fire chief in command has the responsibility for overall scene safety. He maintains control of all line operations through the use of field commanders who are usually company officers. |
| 76. MABAS defined             | The fire chief in command has the option of using MABAS—the mutual aid box alarm system.   |
| 77. Firefighters and vehicles | MABAS provides a prepared response plan for all fire and rescue vehicles.  |
| 78. Fire engine               | Through MABAS, adequate backup resources are also provided for coverage in the event of another incident.  |
| 79. Fire chief and captain    | In order to be effective, the operations of multiple fire companies must be coordinated through the fire chief at the command post.  |
| 80. Fire hose up ladder       | Special situations . . .   |
| 81. Articulating boom         | . . . may require the use of specialized equipment.  |
| 82. Firefighter with airtank  | Only trained personnel should be allowed to utilize this equipment.  |
| 83. Firefighter moving victim | Whenever the lives of victims are endangered, it is a primary function of the fire service to remove those victims to a safe area.   |

- |   |   |
|---|---|
| 84. Rescue on roof  | Fire personnel should be trained for:   |
| 85. Victim lowered from roof                              | . . . special rescue operations, such as roof rescues,  |
| 86. Stretcher being carried                               | . . . or below ground rescues.  |
| 87. H <sub>2</sub> O in tank for pumping                  | It is the fire chief's direct responsibility to provide an adequate water supply whenever fire is a factor hampering rescue or triage.  |
| 88. Radiological team                                     | Special attention must be paid to accidents involving radioactive materials. If an accident involves radioactive materials, the Illinois Emergency Services and Disaster Agency must be notified and a radiological response team requested.                    |
| 89. Geiger counter being used on radiological team member | Radiation can only be detected by trained radiological monitors utilizing special instruments. Radiation cannot be seen, smelled, or tasted. McHenry County's Emergency Services and Disaster Agency sponsors courses to train people as radiological monitors. |
| 90. Geiger counter and victim                             | Any fire, rescue, or police department in McHenry County that maintains a minimum of three certified radiological monitors on their department will be issued a kit containing the necessary instruments to detect radiation.                                   |
| 91. Victim in tall grass                                  | Only lifesaving first aid should be administered to the victims of a radiological incident with as little personal contact as possible. Every effort should be made to rescue the persons affected with the least amount of exposure to the rescuer.            |
| 92. Rescue personnel talking                              | Those who contact the victims should be segregated until released by a radiological team or medical personnel familiar with nuclear medicine.   |
| 93. Sign: McHenry Hospital                                | Presently in McHenry County, only McHenry Hospital . . .  |

- |  |  |
|--|--|
| 94. Memorial Hospital for McHenry County | ... and Memorial Hospital for McHenry County are equipped to handle those involved in radiological incidents.  |
| 95. Hospital personnel near door         | Each agency that may be involved in responding to a disaster must understand the Emergency Medical Service Annex.  |
| 96. EMS person with tagged victim        | Personnel should be trained and METTAGS should be provided in all disaster kits in order for agencies to test skills and gain confidence.  |
| 97. Meeting                              | Exercises and disaster drills should be planned, executed, and evaluated.  |
| 98. "Victims"                            | All simulation of the injuries should be as realistic as possible.   |
| 99. Moulaging                            | Victims should be given instructions on how to act as a consequence of the injuries they are simulating.   |
| 100. Evaluator in emergency room         | Evaluators should be briefed in the goals to be accomplished through the exercise.   |
| 101. Critique                            | At the conclusion of the exercise, a critique session should be held. The purpose of this session is to accumulate as much information as possible regarding performance of participating agencies. Based upon this critique, the annex can be reviewed and revised as necessary and additional training exercises can be scheduled. |
| 102. Title slide                         | As a result of over two years of planning, testing, and revising, the McHenry County Emergency Medical Service Annex was formulated. This annex, because of the cooperation of all participating agencies, makes McHenry County well-prepared to meet large and pressing medical emergencies.  |
| 103. "We wish to thank ..."              | "12-29." "Go ahead."   |

104. Fire at night

"You need a rescue squad member up there?" "We talked to the command post. I presume they're sending one up." "10-4."

105. "Code 3" vehicles at night

(siren)

106. Black

---