now is considered a priority of the EU and 11 February has been established as the EU 1-1-2 Day. The EENA also has influenced the upcoming legislation and now is organizing several projects aiming at establishing "1-1-2 excellence centers", networking emergency services professionals, establishing standards for all parts of the 1-1-2 service chain, and creating a 1-1-2 Foundation for the support of information actions. In parallel, EENA has been actively supporting the idea of a Pan-European early warning and alert system (EWS) for all types of imminent or on-going disasters, and focusing on the behaviors people should adopt to avoid harm, rather than the type of the disaster.

Requesting competent authorities to ensure a better 1-1-2 service chain should be a main objective. The establishment of an EWS also should be a priority for the EU, especially with the >150,000 tourists crossing its internal borders every year. Keywords: 1-1-2; communication; emergency; emergency call number; Europe; telecommunication

## Prehosp Disast Med 2009;24(2):s81-s82

## Poster Presentations—Communication and Information

(O68) MedDSM Proposes Two New Tools to Cope with Disasters

Hysham Hadef; Thierry Pelaccia; Jean Claude Bartier; Jacques Texier

SAMU 67/Hopitaux Universitaire de Strasbourg, Strasbourg, France

Managing a large number of victims requires rapidity, reliability, and the instant dissemination of information. MedDSM proposed two new tools to help cope with these constraints: (1) the Categorization and Identification of Victims Involved in Catastrophes (CIVIC) bracelet; and (2) the Catastrophe, Aid with the Organization of Relief (C@OR) computer system. Categorization according to seriousness and the identification of victims is achieved by the use of a pre-numbered, waterproof paper bracelet color-coded according to the degree of urgency. This information is contained in a barcode as well as on a series of detachable stickers that can be used for the different documents in the treatment chain. The entry of this information into the computer using a barcode reader is managed by user-friendly software that allows for the rapid processing of the data, and immediate obtaining of statistical information and epidemiological studies. Dissemination in real time to other terminals is possible thanks to a wireless local area or wired network. These new tools can be deployed just as well in prehospital situations as in emergency departments. This system of managing flows of victims has been tested in numerous exercises. It has been presented to the French Ministry of Health, which has decided to equip Strasbourg as a pilot zone. The reliability of virtually immediate dissemination of the information enables this

system to make an instant assessment of the different triage sites, and therefore, anticipate the decision-making chain. Keywords: categorization; communication; disaster; information; triage

Prebosp Disast Med 2009;24(2):s82

## (O69) Video-Assisted Telemedicine System Improves Triage and Situational Awareness in Disaster Response Peter F. Hu;<sup>1,2,3</sup> Colin F. Mackenzie;<sup>4</sup> Ayan Sen;<sup>1</sup>

Steven Johnson;<sup>1,3</sup> John Spearman;<sup>5</sup> Steven Seebode;<sup>5</sup> Timothy Brooks;<sup>2</sup> David Gagliano;<sup>5</sup> Dale Yeatts;<sup>1</sup> Gary R. Gilbert;<sup>6</sup> Ronald K. Poropatich<sup>6</sup>

- 1. Program in Trauma, University of Maryland School of Medicine, Baltimore, Maryland USA
- 2. Department of Anesthesiology, University of Maryland School of Medicine, Baltimore, Maryland USA
- 3. R. Adams Cowley Shock Trauma Center, Baltimore, Maryland USA
- 4. National Study Center for Trauma and EMS, Baltimore, Maryland USA
- 5. Cisco System Inc, Herndon, Virginia USA
- US Army Medical Research and Materiel Command (USAM-RMC), Telemedicine and Advanced Technology Research Center (TATRC), Frederick, Maryland USA

Introduction: Effective, real-time, situational awareness and communication is critical to disaster management and coordination in the field and at the Emergency Operations Center (EOC).

This report describes a rapidly deployable, wireless, real-time video distribution system that was used in a civil-military joint disaster field exercise at a major US-international airport. The utility of real-time video for EOC responders participating in the exercises was evaluated.

Methods: An incident command, mass-casualty reception and triage area was created and a military transport plane (C-130) arrived at the international airport taxiway with 30 "live" patients and 130 "paper" patients. The system provided instant delivery of multi-channel live video by nine video cameras to a remote EOC to provide instant situational awareness and telemedicine consultation. Six experts at the EOC with incident command experience completed the evaluations on a 1–5 (worst-to-best) Likert Scale.

**Results:** A total of 19.5 hours (nine cameras, 130 minutes each) of video were transmitted to the EOC in real-time. Based on the experts' evaluation: (1) live video imagery from the exercise site greatly improved EOC situational awareness (4.7); (2) developments in the field could be tracked and triage status immediately determined (4.3); and (3) increased situational awareness helped reduce radio traffic, increase coordination effectiveness, and resulted in less chaotic environment in the EOC (4.8).

**Conclusions:** Video-assisted telemedicine system enhances triage and situational awareness for emergency medical care, and could be a force in future civilian disaster and military applications.

Acknowledgements: Supported by W81XWH-05-2-0081 Keywords: disaster response; situational awareness; telemedicine; triage

Prehosp Disast Med 2009;24(2):s82