



HOSPITAL AND HEALTH SYSTEM  
FIRE RESPONSE PLAN AND PROCEDURE

DEPARTMENT(S): Surgicenter

<b>Surgicenter FIRE RESPONSE PLAN</b> <small>Egress/Fire Protection Plan: <a href="#">Q:\P&amp;P - Safety\Fire Plans &amp; Egress Plans\Egress Floor Plans</a></small>	<b>ADDITIONAL DEPARTMENT SPECIFIC RESPONSE</b>
<b>I. Staff Response at fire scene - RACE</b>	
<b>NFPA Occupancy Type:</b>	Ambulatory Occupancy
<b>Special Notes:</b>	See "Fire in the Operating Room Intraoperative Roles" at end of policy
<b>R=RESCUE – RACE</b> 1. Remove patient and staff that are immediately in danger. Move to safe side of smoke wall. (See below for details) 2. Call out to fellow staff members to activate fire alarm system if you cannot immediately initiate by yourself.	<ul style="list-style-type: none"> <li>All active surgeries will be completed as soon as possible, if on safe side of smoke wall.</li> <li>No new surgeries will begin until the all clear is announced.</li> </ul>
<b>A=ALARM - RACE</b> 1. Activate the nearest fire alarm pull station. 2. Call Patient Access personnel at front desk to announce on Group/Call with location. 3. Patient Access personnel place 9-911 call. 4. If front desk is closed, nearest person make Group/Call stating location and call 9-911. 5. If location is unknown, check the fire panel at front desk or pre/post nursing station 6. When safe to do so notify Director of Surgical Services, Security, Administrator on Call.	<ul style="list-style-type: none"> <li>Pull stations are located by entryways.</li> <li>Fire alarm annunciator panel in main lobby or Pre/post nursing station will indicate what area is in alarm.</li> <li>Security and Facilities Operations is notified of alarms by system.</li> </ul>
<b>C=CONTAIN - RACE</b> 1. Close doors isolating smoke and/or fire. 2. Leave lights ON. 3. Turn off all unnecessary equipment if the situation permits. 4. If medical gases are in the room where actual fire is located, isolate gases once all patients on O2 have been safely transferred to portable units. (See below for details)	
<b>E=EXTINGUISH - RACE</b> 1. Extinguish fire using proper fire extinguisher 2. Fires larger than a small waste basket or producing large volume of smoke should be contain and area evacuated. 3. Extinguisher Operation -PASS a. Pull the pin. b. Aim the nozzle at the base of the fire. c. Squeeze the handle to discharge the contents d. Sweeping motion with the nozzle. 4. If unable to extinguish fire, contain fire and evacuate to a safe area.	
<b>E=Evacuate - RACE</b>	

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<p><b>Surgicenter</b></p> <ol style="list-style-type: none"> <li>In patient care areas evacuation is directed by Surgicenter Manager/designee or Fire Department.</li> <li>Patients should be safely evacuated. The choice of route is as follows:</li> <li>Move horizontally to adjacent smoke compartment or patient suite area through labeled smoke compartment doors.</li> <li>Evacuate building if directed (see below).</li> </ol> <p><b>Non-Patient Care Areas</b></p> <ol style="list-style-type: none"> <li>If, as an employee, you are not involved in the evacuation of patients; evacuate your area as affected by fire.</li> <li>Use corridor to relocate to safe area.</li> <li>Do not interfere with patient care evacuation.</li> </ol> <p><b>Entire building evacuation (Surgicenter Only)</b></p> <ol style="list-style-type: none"> <li>Surgicenter Manager/designee and/or the Fire Department will make the decision to evacuate entire facility or shelter- in-place for area not in the immediate fire zone.</li> <li>Meet in lobby of Greenfield Clinic to verify everyone is out.</li> <li>Refer to CHW <i>Evacuation or Shelter-in-Place policy and procedure</i> for evacuation details.</li> <li>Notify Director of Surgical Services and Administrator on Call.</li> </ol>	<p>Surgicenter contains two smoke zones to allow horizontal evacuation to the next zone.</p> <p>If total evacuation is needed, follow direction of Surgicenter Manager/designee or Fire Department.</p> <p>Meet in lobby of Greenfield Clinic.</p> <p>The manager or designee for perioperative and Perianesthesia departments will assess how many patients, need to be transported to other healthcare facilities.</p>
<p><b>Staff Responders to Fire Scene</b></p> <ol style="list-style-type: none"> <li>Designated responders to fire situations are Surgicenter team members.</li> <li>Other staff needed at scene will be communicated through the Surgicenter Manager/designee or Fire Department.</li> <li>Utilize assistance of Facilities personnel if in the building at the time of event.</li> <li>Once fire has been extinguished or contained responders will await arrival of fire department and communicate current condition and probable cause.</li> <li>Once fire department has established that the cause and risk of fire has been removed, Manager/designee to initiate an "All Clear" once the systems have been reset by Facilities.</li> </ol>	<p>If area cannot be extinguished, contain and evacuate area.</p>
<p><b>Management of Allied Health Care Providers</b></p> <ol style="list-style-type: none"> <li>Physicians, Licensed Independent Practitioners (LIP), volunteers, and students should follow the direction of the Surgicenter Manager/designee or Fire Department.</li> </ol>	
<p><b>Management of patients and families</b></p> <ol style="list-style-type: none"> <li>Staff needs to communicate to patients, families, and visitors at scene of the situation.</li> <li>If area is to be evacuated, instructions on process should be provided.</li> <li>Charge nurse for Perianesthesia to prepare names of staff, families, and patients in area.</li> <li>OR Supervisor or Charge Nurse to prepare names of staff, providers, and patients in area.</li> <li>Inform Surgicenter Manager/designee or Fire Department of patient names and location evacuated patients have been moved to.</li> </ol>	
<p><b>Control of Medical Gasses</b></p>	

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<ol style="list-style-type: none"> <li>1. Nursing/Providers with the input from Facilities Operations and/or Fire Department will determine the need to shut of medical gases to an area with an active fire.</li> <li>2. Nursing/Providers will evaluate patients that are affected by the shut off and transfer patients to portable O2 tanks prior to shutoff.</li> <li>3. Label on medical gas zone valve will identify all rooms that will be affected by closing valve.</li> <li>4. To shut off medical gases: Locate plastic panel with ring. Pull the ring and turn the valve.</li> <li>5. Have standby tanks available.</li> </ol>	<p>Portable O2 tanks are located on crash cart, rolling stand in PACU, additional can be obtained from Medical Gas Storage room.</p>
<p><b>Management of Egress Corridors</b></p> <ol style="list-style-type: none"> <li>1. Equipment and other obstacles in corridors need to be removed and placed in non-occupied rooms.</li> <li>2. Ensure smoke and fire separations doors are not obstructed and in closed position to limit the spread of smoke and/or fire.</li> </ol>	
<p><b>II. Fire Situation Return to Normal Operations</b></p>	
<p>Actual Alarm –All Clear</p> <ol style="list-style-type: none"> <li>1. Building and staff will remain in “<i>fire alarm response</i>” until the event has been cleared by the fire department.</li> <li>2. Upon Fire Department approval, Patient Access front desk team will be instructed by Facilities Operations to issue “Fire Alarm All Clear”</li> <li>3. Upon “<i>Fire Alarm All Clear</i>” staff can resume normal operations.</li> </ol> <p>Unintended Alarm - Return to Normal Activity</p> <ol style="list-style-type: none"> <li>1. An unintended occurs when the response team has clearly identified the source of the alarm and it is not related to an actual fire event.</li> <li>2. Facilities Operations or Surgicenter Manager/designee will instruct the Patient Access front desk team to announce “Fire Alarm Return to Normal Activity”.</li> <li>3. Staff not in the immediate area of the fire alarm may return to normal activities.</li> <li>4. The fire alarm system will not be reset. Doors will remain closed, stair fans continue to run, HVAC system will remain in a fire control mode, and strobes will continue to flash.</li> <li>5. Full systems reset will not occur until the fire department has arrived and given final approval to call an “All Clear.”</li> </ol>	
<p>Event Debriefing</p> <ol style="list-style-type: none"> <li>1. Departments involved in the fire alarm location should complete the “<i>Fire Drill Activation Team Observer Response Form</i>” attached to the Fire Drill Policy and return to Facilities Operations.</li> <li>2. Facilities Operations will review event and report finding to the Safety Committee.</li> <li>3. Facilities Operations is responsible to complete State reporting of fire events.</li> </ol>	

## **Fire in the Operating Room Intraoperative Roles**

### **Surgeon/Dentist**

- Smother fire (wet towel, gloved hand)
- Assess patient for injury
- Remove burning material from patient
- Assess for secondary fire
- Cover open wound with sterile drape or towel (for transport)

### **Anesthesiologist**

- Stop flow of oxygen and use room air
- If fire involves ET tube, remove ET tube
- Remove residual material from airway
- Check airway to make sure the fire is extinguished
- Restore patient breathing with room air
- Release drapes from IV poles

### **Scrub Person**

- Pour saline/water on fire
- Smother the fire with wet towels
- Push mayo stand out of way
- Push the back table away from sterile field
- IF DRAPES ARE BURNING: Discard drapes onto floor and throw saline/water onto burning drapes (do not stamp out)
- Assess for secondary fire
- Gather involved materials/supplies

### **Circulator**

- Call on phone Group Call for help or push Code Blue to get help quickly to the room.
- Assign someone to activate Fire Alarm Pull Station and inform Patient Access team at front desk of location of fire.
- Extinguish burning materials
- Unplug ESU or other electrical equipment involved in the fire
- Assist with decision to evacuate
- Help anesthesia provider turn off oxygen (gas valves outside door)
- Keep OR doors closed
- Gather involved materials/supplies
- COMPLETE EVENT REPORT after event

### **OR Supervisor (charge person)**

- Pull fire alarm if it hasn't been pulled
- Help anesthesia provider turn off oxygen (gas valves outside room)
- Direct personnel to close all OR doors
- Unplug all electrical devices
- Grab a fire extinguisher if needed
- Assess possible evacuation destinations
- Notify team of destination
- Help with evacuation
- Delegate roles for available staff
- Assist with decision to evacuate
- Inform Surgicenter Manager of situation
- Compile a list of all staff, providers, patients in the OR

### **Support Staff**

- Act as traffic director
- Obtain code cart, if needed
- Follow directions from manager

### **Manager**

- Assign a liaison to the family members
- Act as liaison to family members
- Delegate roles for non-direct caregivers
- Act as traffic director
- Direct fire response team or fire department to location
- Assist with decision to evacuate
- Communicate with surrounding areas of the need to evacuate
- Activate disaster plan