

Beth Israel Deaconess System-Wide Medical Team Hurricane Irma Response

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BIDMC, BID-Needham, BID-Milton, BID-Plymouth

Introduction/Problem

Hurricane Irma made landfall in the Florida keys as a large, powerful Category 4 hurricane on September 10, 2017. It was the strongest hurricane ever recorded with sustained winds of 180mph in the Atlantic basin outside of the Gulf of Mexico and Caribbean Sea.

On September 8th the State of Florida requested a ten person team to provide medical assistance through Emergency Management Assistance Compact (EMAC), a state to state mutual aid compact. Florida anticipated devastation in south Florida and catastrophic impacts throughout the Keys. The Massachusetts Department of Health (MDPH) and Massachusetts Emergency Management Agency (MEMA) reached out to emergency managers at all hospitals across the state asking for assistance with the EMAC request.

In March 2017, BIDMC sent a 20 person multi-discipline team from all BID hospitals to The Center for Domestic Preparedness in Alabama to train for mass casualty response. This team trained for a week in command center leadership, incident command, hazmat and decontamination and hospital mass casualty response. This team had the skill sets, training and expertise to be able to deploy to Florida.

BIDMC Emergency Management reached out to our partner hospitals with the request and was able to confirm, obtain managerial approval for nine staff for a two week deployment within 6 hours. We put together our team documents, costs, signed MOU's and Florida accepted our package and asked us to deploy immediately.

Aim/Goal

The original goal of this medical relief team was to provide medical assistance at a special needs medical shelter. Due to our training, skills and experience, we were able to provide medical care not only at the shelter but then moved down into the keys for six days, paired up with the National Guard at points of dispensing sites (PODS) from Islamorada down to Key West and triage the residents that had not left. We spent two days in Miami at a shelter with ~75 residents, assisted with their medical care and moving them back into their homes when power

The Team

- Meg Femino, Senior Director, Emergency Management, BIDMC, team lead
- Lisa Devlin RN, Nurse Manager ED, BID-Plymouth
- Phillipa Breslin RN, Nurse Manager ED, BID-Milton
- Jill Sullivan RN, Nursing Director Infusion, BID-Needham
- Jeff Lamson RN, Clinical Manager ED, BIDMC
- Jaimee Cathers RN, Emergency Department, BIDMC
- Courtney Berube RN, Emergency Department, BID-Milton
- Lisa Bergandahl RN, Director Critical Care and Respiratory, BID-Plymouth
- Krisit Marquis, PCT, BIDMC

The Interventions

- Compiling a comprehensive packet for Florida, prepare team for self sustainment during deployment
- Arranging logistics to travel into New Orleans, rent cars, purchase supplies, communications, link in with the Tallahassee Emergency Operations Center for assignment and daily checks, drive 17 hours to Miami
- Staffed special needs shelter in Miami on generator power, patients had significant medical needs- LVADS, diabetics, paraplegics, elderly, dialysis etc.
- Set up a Red Cross shelter in Islamorada
- Staffed five PODS from Islamorada to Key West, triaging residents who have been with out food, water and power for 6 days
- Working with the State, County and City Emergency Operations Centers to provide them with Public Health surveillance, situation status and where to drive medical resources
- Providing medical care to vulnerable populations in Key West, Bahama Village

Results/Progress to Date



- The BID Team cared for and helped over 75 special medical needs patients return to their homes, find and reunify family members
- The team screened ~3200 family members for medical needs and public health surveillance. This information was key to the Emergency operations Center in understanding the population health of residents who stayed out the hurricane on the keys
- Colonel Roy Basset MD, State Surgeon in charge of Florida National Guard- "The Beth Israel Deaconess Medical Team should be considered a role model for civilian medical teams"

For more information, contact:

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