## Record of Conversations – Lexington County EMS RRD18MR003

On the morning of February 8, 2018 NTSB Chief Medical Officer Mary Pat McKay and Mark Williams of the FRA spoke with Deputy Chief Jason Hentz and Chief Brian Hood of the Lexington County EMS.

Chief Hood was on call as the commander and was called by the S. Regional Commander and notified of the event while he was enroute to the scene. He spoke with Chief Hentz and they agreed that Chief Hood would staff the EOC and Chief Hentz would act as EMS IC on scene. Once in the EOC, hospitals were called to declare their bed status and availability. He was clear that some hospitals had been severely impacted by the flu and were over capacity before the MCI started.

Once on scene, unified command was established around the white Tahoe described by the Sheriff. Chief Hentz staffed that. Communications were both by radio and cell phone. They were able to identify, triage, and transport 107 patients (their internal number) in under 3 hours. They had a helicopter available but didn't need it. All EMS and Fire personal were off scene 5 hours after the incident. Two separate casualty collection points (each with an area commander) were established (either side of the train) because of terrain – which they identified by known GIS maps kept up to date by the county.

Both commented that the small number of reds and yellows and the fact that the greens were all ambulatory was very positive; only about 8 people required a hand carry to an ambulance. As a result, very little pre-hospital care was performed; mostly transport. This made it faster. Also, decision made and carried out not to move any luggage with patients. Luggage was later taken to the shelter to be reunited with victims. (one issue raised late in the game was a question about the possibility of having weapons in the checked luggage – they will follow up on this in the future.)

Overall, they had 5 ambulances and one mass casualty bus (carries 20 wounded); in addition, they called in 2 Richland ambulances and their MCI bus as well as an ambulance out of Ft. Jackson to move the injured. Others offered but were not needed.

Worked to get county bus and then bus support from the county's transport for the aged but by the time they arrived, the large majority of the uninjured had been transported to the shelter by law enforcement.

"No egos" – fire dept cleared the diesel issue and then began assisting EMS. They built a temporary bridge over the "creek" on the auto ramp side for access. EMS folks provide first responder training to the FD; all well known to each other and abilities known. No surprises. They drill together at least 5 times a year and this helps as well. There were no injuries to first responders during the event (as far as known).

No patients were in wheelchairs on the train (as far as known). Some people spoke broken English (mostly Spanish speakers). One autistic young man got separated from his mother when she got transported to the hospital. She called back, he was identified, kept watch of, and then transported to the hospital to be reunited. (He was non-verbal but uninjured.)

Local system of regional medical assist teams long established (essentially each ½ a DMAT) and a small number of these folks were mobilized to provide support at the shelter.

As far as communication with hospitals, EOC worked with the Palmetto Health System emergency response person (Baptist, Richland, Lexington Hospitals are in this system). Initially held back on the Level I trauma center (Richland) because didn't know if they were going to find more reds. Once sure not, the patient distribution was decided by the Palmetto contact who was then in contact with the hospitals. The VA reached out and offered to provide care, even to non-DOD related injured patients. That's how they got a few greens.

The local EMS personnel have participated in training events with CSX Railroad. They did not recall any specific training with Amtrak.