

News: January 2009

Maryland: I-70 pileup put training to the test

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January 26, 2009

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HAGERSTOWN — It was the type of situation hospitals prepare for with drills.

Fifty vehicles, mass casualties, multiple-trauma patients, and dispatch wanted to know how many Washington County Hospital could handle.

Luckily, hospital staffers said, when that call came in Jan. 19 following the deadly pileup on Interstate 70, the hospital was having a relatively slow day.

Luckier still, one of its emergency room doctors was already on the scene.

Dr. Angelo Falcone was on his way to work at the hospital when, by chance or fate, he found himself in the middle of the most extensive accident the hospital had handled in years. Uninjured himself, Falcone was able to fashion a tourniquet for a man's severed leg and begin triaging victims before the first ambulances could arrive.

"There was probably a little bit of fate involved," Falcone said. "Angels, or whoever you believe in, were probably with us that day."

Falcone said he and his daughter, 20-year-old Katelyn Tharp, who works as an assistant at the hospital, were driving to work together when the crash happened.

"As we were coming down South Mountain, toward the bottom of the mountain, I noticed cars in front of me were sliding and braking, and (I) tried to avoid them, ended up being pushed off the road into another vehicle," he said.

Two or three other vehicles then crashed into Falcone's Infiniti sedan, hitting it from behind and both sides, and shattering the windows.

Just when he thought the crash had ended, Falcone looked into his rearview mirror and saw a tractor-trailer heading toward them. He and his daughter ran into the woods. The truck missed them by about 10 feet.

As Falcone and Tharp retreated into the woods, the sound of vehicles colliding continued.

"It seemed like a long time, but it was probably just two or three minutes," he said.

Finally it stopped, and Falcone's training took over.

"An E.R. doc's an E.R. doc, whether he's in the emergency room or a situation like that, so it's kind of automatic," he said.

The first person Falcone helped was a nearby man whose leg was amputated — either by the truck or by debris — when the tractor-trailer slid past. He was bleeding badly and in danger of going into shock, Falcone said.

Someone brought over a bungee cord for Falcone to use as a tourniquet, and others collected blankets and jackets to keep the man warm.

"The one thing that was really amazing was everyone was trying to help one another," Falcone said.

Falcone then walked up and down the accident scene, checking victims and seeking out those most seriously hurt. He crawled into the vehicle of one of the two women killed in the crash to see if there was anything he could do.

"Unfortunately, there wasn't," he said.

Within about 10 minutes of the crash, EMS crews began arriving on the scene from Frederick and Washington counties, and they quickly set up an incident command structure, Falcone said.

"They did a great job," he said.

Falcone briefed the incident commander on what he'd seen, then stayed at the scene for about an hour working with patients before catching a ride to the hospital with an ambulance. He finished his shift in the emergency room.

Back at the hospital, things ran as smoothly as anyone could have hoped, doctors and emergency department officials said.

"It went extraordinarily well," said Dr. Stephen Kotch, medical director for the emergency department. "It was one of those things that you train for, but no matter how much you train, putting into real-life action, you never know how things are going to come out."

Tipped off by Falcone and emergency dispatchers about what to expect, the hospital began notifying backup doctors, assigning extra nurses and assistants to the emergency department, and shuffling patients to free up space, Kotch said.

Angie McCleaf, resource nurse for the operating room, said she sent one of her nurses who had emergency room experience to assess the patients, and determine what rooms and supplies would be needed.

Several other managers from other floors came down or sent nurses to help, said Lou Ann Myers, clinical manager for the emergency department. All told, 10 to 20 additional people were working in the department, Kotch said.

Hospital officials considered implementing the disaster plan practiced several times a year in drills, which includes calling in additional doctors and staff through a phone tree, but there seemed to be plenty of resources, Myers said.

“It always amazes me and makes me feel really proud when our staff comes together the way they do in a situation like that,” she said.

Ultimately, the hospital saw about 20 patients from the accident, Myers said. Most had orthopedic injuries, such as fractured or broken bones, as their primary injuries, and after that it was musculoskeletal injuries, such as bruises, muscle injuries and contusions, Kotch said.

“For a few, there were significant injuries, but fortunately, overall, the majority of the people involved came out relatively unscathed,” he said.

Some patients whom staff originally thought might need surgery, such as a child with a head injury, ended up being fine in a few hours without it, McCleaf said.

Only three patients were admitted to the hospital that day from the I-70 crash, hospital spokeswoman Maureen Theriault said. Two have since been discharged, and the third is in good condition, she said Monday.

Source: The Herald-Mail