POLICY AND PROCEDURE MANUAL

Pennington Biomedical	**POLICY NO. 580.00**	**Origin Date: 6/2010**
Section:	**Safety**	**Effective Date: 8/21/2014**
Subject:	**Emergency Management Policy/Plan**	**Last Revised: 8/25/2017** ***(updated emergency response team list and fire building coordinator list)***
Source:	**Safety Office**	**Version # 1**

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Attachments:

PENNINGTON BIOMEDICAL RESEARCH CENTER

EMERGENCY MANAGEMENT PLAN

SECTION 1: FACILITY BACKGROUND

Opened in 1988, the Pennington Biomedical Research Center is at the forefront of medical discovery as it relates to understanding the causes of obesity, diabetes, cardiovascular disease, cancer and dementia. It is a campus of the Louisiana State University System and conducts basic, clinical and population research. The research enterprise at Pennington Biomedical includes approximately 80 faculty and more than 25 post-doctoral fellows who comprise a network of 50 laboratories supported by lab technicians, nurses, dieticians, and support personnel, and 13 highly specialized core service facilities. Pennington Biomedical's more than 500 employees perform research activities in state-of-the-art facilities on the 222-acre campus located in Baton Rouge, Louisiana.

SECTION 2: PURPOSE

Pennington Biomedical is subject to emergencies and disasters resulting from major incidents or natural phenomena. This plan provides guidance and procedures to enable the Center to effectively respond to and recover from major incidents, natural disasters or other emergencies. Responses must be timely, vigorous and directed toward containing the situation, minimizing the loss of life and property, averting undue hardship or suffering, and maintaining the maximum operational capabilities of the Center.

Only by annual review and regular exercise of this plan will rescue and recovery actions be effective in protecting human life and health, minimizing danger, restoring normal activities of the Center and in preserving the Pennington Biomedical property and resources.

The purpose of these guidelines is to:

1. Provide the guidance for emergency operations and the utilization of all available Pennington Biomedical resources for the protection of lives, property and the continuance of Pennington Biomedical operations in the event of a natural or man-made disaster or a national emergency.
2. Outline the duties and responsibilities of departments and/or individuals during Pennington Biomedical emergency operations.
3. Establish guidelines for emergency planning and coordination of activities relating to disaster prevention and mitigation, preparedness, response, and recovery as related to local, parish, state, and federal governments.
4. Assign responsibilities for specific duties and activities related to emergency operations and disaster recovery.
5. Objectives of the emergency operations are to:

a. Minimize interruptions to business operations
b. Resume critical operations in a timely manner
c. Minimize financial loss
d. Limit the severity of the disruption
e. Communicate effectively with management/staff the implications of the situation/disaster
f. Maintain a positive public image of Pennington Biomedical

SECTION 3: POLICY STATEMENTS

A. The Center is committed to maintaining the safety and welfare of its faculty, staff and visitors.
B. All Center personnel are expected to take personal responsibility for following the policies and procedures of the Center in the event of an emergency and for acting in accordance with instructions given by the Emergency Management Team.
C. The Center will conduct continuous planning to minimize the risk of personal injury, property, and research loss from critical incidents; will cooperate with local, state and federal agencies and public entities that have responsibilities related to disaster preparedness, response and control; and will take the necessary steps to assure continuity of operations and restoration of normal activities as quickly as possible following an emergency or disaster.

SECTION 4: DEFINITIONS

Emergency – An event that can cause death or significant injuries to faculty, staff, or the public; can suspend business, disrupt operations, create significant physical or environmental damage or that can threaten the Center's financial standing or public image.

Emergency Levels – Levels of emergencies according to their severity and potential impact.

Emergency Response Team – The Center personnel responsible for managing the Emergency Management Plan and for coordinating the Center's response to an emergency. There will be a primary Emergency Response Team and a Secondary Emergency Response Team depending on the severity of the emergency.

Emergency Response Team Leader – The administrator is responsible for convening the Emergency Response Team and for serving as the liaison to the LSU System Office in times of emergency.

Emergency Operations Center (EOC) – A location selected by the Emergency Response Team to be used to coordinate the Center's emergency decisions and resources. The EOC is

located in Room 2015 of Building B in the Barton Conference Room. An alternate site will be designated by the Executive Director or Team Leader if necessary.

SECTION 5: EMERGENCY RESPONSE TEAM

The Emergency Response Team will consist of a personnel representative from all major departments of Pennington Biomedical. The team members must be prepared and trained to execute this plan with or without the assistance or direction of outside agencies. When this plan is implemented and response teams are activated, team members will be relieved of other duties and their response duty will become their primary duty.

The primary Emergency Response Team shall consist of:

Department	Team Member	Contact Number*
Executive Director, Emergency Team Leader**	Dr. Donna Ryan	763-2513
Assoc. Exec. Dir. for Operations	Guy Lavergne	763-3101
Assoc. Exec. Director	Dr. Peter Katzmarzyk	763-2536
Assoc. Exec. Director	Dr. Eric Ravussin	763-3186
Assoc. Exec. Director	Dr. Jennifer Rood	763-2524
Assoc. Exec. Director	Dr. Phil Brantley	763-3046
Assoc. Exec. Director	Dr. Richard Rogers	763-2665
Veterinarian, Comparative Biology	Dr. Kem Singletary	763-0924
Medical Foundation Representative	William Silvia	763-3152
Research Foundation Representative	Brad Jewell	763-2684
Medical Management	Dr. Frank Greenway	763-2576
Clinical Operations	Rob Leonhard	763-0948
Director of Human Resources	Sharon Hebert	763-3024
Director of Physical Plant	Jerry Blanchard	763-0914
Director of Computing Services	David Alexander	763-3172
Director of Communications	Lisa Stansbury	763-2978
Asst. Director of Security	Scott Bertrand	763-2508
Safety Office	Dr. Christy White	763-2667
Legal Representative	Leigh Lamonica	763-2515
Asst. Director of Sponsored Projects	Kelly Pitre	763-2518
Director of Fiscal Operations	Monica Mougeot	763-0915
Information Center	Lori Steib	763-2556
Central Stores	Richard Caro	763-2522

*All team members will maintain alternate phone numbers and email addresses.
**Or will designate a Team Leader based on the type of event.
Critical personnel notification will be in accordance with and follow the procedures of the LSU System Office and the Emergency Preparedness section of the Pennington Biomedical Safety

Manual. Department heads, managers and supervisors shall relay threat information, warnings and readiness preparedness condition information to ensure all employees are notified.

SECTION 6: EMERGENCY OPERATIONS CENTER (EOC)

The EOC is the centralized communication and coordination facility for emergency response. It will be the central meeting location for critical management and support personnel and will serve as an incident support operations and resource center.

The EOC is located in Room 2015 of Building B in the Barton Conference Room.

When the Emergency Operations Center is activated, department heads will direct the efforts of their departments from the EOC. Laptop computers and essential daily operating supplies will be brought to the EOC by each department at the time of activation.

Functions of the EOC:

1. Coordinates all emergency response activities.
2. Provides support, assistance and supply for operating units.
3. Provides a communications base and message support.
4. Obtains local, state and federal assistance as needed.
5. Provides public information services.
6. Provides an administrative and operational decision center for the facility's response effort.

The priority of work in activating the EOC:

1. Establish effective communications with the Emergency Response Team and other department heads.
2. Establish radio and/or telephone communications with East Baton Rouge Emergency Hotline (911).
3. Establish internal telephone communications.
4. Establish computer network links.
5. Set up maps, building layouts evacuation routes, etc. as required.
6. Work with the Director of Communications to establish the media center / press room and issue notifications as appropriate.
7. Perform other duties as required by the situation.

SECTION 7: CONCEPT OF OPERATIONS

A. PHASES OF MANAGEMENT

These guidelines are formulated on an all-hazard approach and acknowledge that most responsibilities and functions performed during an emergency are not hazard specific. Likewise,

these guidelines account for activities before and after, as well as during emergency operations. Consequently, all phases of emergency management are addressed as discussed below.

1. **Mitigation** – Mitigation activities are those which eliminate or reduce the probability of a disaster occurring. Also included are those long-term activities, which lessen the undesirable effects of unavoidable hazards.

2. **Preparedness** – Preparedness activities serve to develop the response capabilities needed in the event an emergency should arise. Planning and training are among the activities conducted under this phase.

3. **Response** – Response is the actual provision of emergency services during a crisis. These activities help to reduce casualties and damage, and speed recovery. Response activities include warning, fire, evacuation, rescue and other similar operations.

4. **Recovery** – Recovery is both a short-term and long-term process. Short-term operations seek to restore vital services to Pennington Biomedical and provide for the basic needs of employees, students, study participants, and visitors. Long-term recovery focuses on restoring Pennington Biomedical to its normal pre-disaster, or an improved, state. The recovery period is also an opportune time to institute future mitigation measures, particularly those related to the recent emergency. Recovery actions include identification of damaged areas with assessment of needs, restoration of non-vital facility services, reconstruction of damaged areas and similar required actions.

B. INCREASED READINESS CONDITIONS

Most emergencies follow some recognizable build-up period during which actions can be taken to achieve an appropriate state of maximum readiness. It is acknowledged that disasters are unique occurrences, which require specific actions dependent upon the type, nature and extent of the emergency. The following conditions of increasing readiness will be used as a means of delineating Pennington Biomedical alert posture:

1. **Level 1** – "Level 1" will be used to denote a situation that causes a higher degree of readiness than is normally present. Employees should review emergency plans and check supplies and equipment. Level 1 actions will be triggered by the onset of particular hazard vulnerability seasons such as tornado season, hurricane season, fire threats due to severe drought conditions, the potential for civil disorder, or an increase in international tensions.

2. **Level 2** – "Level 2" will be used to refer to a situation which presents a greater potential threat than Level 1, but poses no immediate threat to life and/or property. This condition includes situations that could develop into a hazardous condition such as tornado watches, hurricane watches, extensive utility outages; bomb threats, etc.

Departments should begin reviewing contingency and evacuation plans and begin preparing for possible emergency response.

3. **Level 3** – "Level 3" will be used to denote hazardous conditions in which the significant potential and probability of causing loss of life or extensive damage to property are probable. This condition will require some degree of warning to personnel and will be triggered by severe weather warning information issued by the National Weather Service and/or LSU Administration. This condition includes tornado and hurricane warnings, flash flood warnings, small localized fire, localize chemical spill, biological agent threats, potential civil disorder, such as domestic violence or picketing from environmental organizations and any other localized violence. Departments should place essential personnel on standby status and the Emergency Operations Center may be activated.

4. **Level 4** – "Level 4" will be used to signify that hazardous conditions are imminent. This condition denotes a greater sense of danger and urgency than Level 3 and includes: a hurricane; a tornado has been sighted near the facility; wide-spread flooding is occurring; explosion and/or fire in a laboratory that is quickly spreading; hostage situations; wide-spread chemical spills; biological agent released in the facility; terrorist attack.

C. EMERGENCY NOTIFICATION SYSTEM

1. During a Level 1 or a Level 2 emergency, PBRC Security will notify all personnel to review emergency plans, check emergency supplies and determine that all necessary equipment that requires emergency power support is properly maintained. This can be accomplished via facility-wide email with periodic updates occurring as necessary. Some Level 2 responses will include notifying the Safety Officer to aide security personnel in the appropriate emergency response.

2. During a Level 3 or Level 4 emergency, the Emergency Response Team Leader will activate the Emergency Management Plan and initiate the Emergency Operations Center. The Emergency Response Team Leader will also delegate responsibilities to team members as needed to begin the Center's response. If external support is needed to manage the emergency (local fire department, local police, etc.) the Emergency Response Team Leader will notify the appropriate agencies. The Communications Director will contact the news media, as appropriate, for dissemination of information as directed by the Emergency Response Team Leader; prepare announcements for the media concerning the emergency; and initiate any necessary crisis communication plans for the purposes of disseminating information.

   Comparative Biology Core will begin its Emergency Preparedness Procedures. If necessary, activate the Animal Rights Activist Crisis Plan (**Attachment 2**).

Other individual departments will activate their own Emergency Preparedness Procedures as required.

3. When conditions have stabilized and normal operations can resume, the Emergency Management Plan will be deactivated by the Emergency Response Team based upon advice and recommendations from members of the Team and external participants, as appropriate. An official announcement will be disseminated.

4. If the nature of the emergency requires continuation of some emergency services, the Emergency Response Team may appoint special work groups to coordinate those activities. Continuing concerns may include: ongoing repairs to structures; administrative space adjustments; support services for affected faculty and staff; and community relief efforts.

D. EXERCISING AND MAINTAINING THE PLAN

The Emergency Management Plan shall be reviewed annually and modified as necessary. Each department head is responsible for communicating the content of the EMP to its employees. Also, department heads will expect and plan for testing in the form of structured walk-throughs, single department tests, cross-departmental tests, and full enterprise recovery tests by the primary Emergency Response Team.

SECTION 8: EMERGENCY BINDER

An "emergency kit" shall be maintained in the command center that will consist of the following items:

- All maintained contact lists
- Complete set of campus floor plans and maps
- An event log to record information that will facilitate the post crisis evaluation.
- Written instructions to activate emergency phone and website

The contact lists, campus plans, and maps kept in the kit should have readily visible dates of creation and revision. The kit shall be updated annually. Documentation of the annual update shall be readily visible.

** Procedures for occupying, vacating and moving laboratories or equipment shall include notification to the Associate Executive Director for Operations of any change in locations of hazards.*

SECTION 9: SPECIFIC EMERGENCY PROCEDURES

A. FIRE

Procedures for person(s) discovering a fire:

Employees should adhere to the following procedure to report a fire:

1.) Activate the nearest fire pull station.
2.) Call Security @ 3-2508. Security will first assess the situation and then call the fire department, if necessary. Security will also contact Facilities and will meet and direct the fire department to the fire location.
3.) If unable to contact Security, or if the fire is serious, call 911. The first responder should meet and direct the fire department to the fire location.
4.) When calling either Security or 911, give the location and type of fire, your identification and department, and evacuation directions to personnel at fire site.
5.) Exit the building.

If the fire is small and confined to its origin, use the portable fire extinguishers, which are located in the corridor cabinets. DO NOT attempt to fight a fire that is spreading rapidly, may block your exit, or if you are unsure how the extinguisher works. Do not endanger yourself while attempting to fight a fire. Close doors to confine fire and smoke. Then leave the building and proceed to designated assembly area.

Procedures for employees during a fire alert:

1.) Upon notification of an emergency condition, assume that the emergency is real until you learn otherwise.
2.) Turn off potential hazards in your area.
3.) Close the doors in your area.
4.) Do not use the elevators.
5.) Use caution when approaching doors. If the door is hot, do not open it.
6.) Leave the building using the nearest stairway to each ground level. If the stairs are unusable because of fire or smoke, use alternate pathways of escape.
7.) Once outside the building, stay clear of building and roadways due to approaching emergency vehicles. Proceed to designated assembly area.
8.) Do not reenter the building unless you are given permission to do so.
9.) If you are physically handicapped or unable to walk down stairs, call 3-2508 to report your location and receive instructions from the security officer. If there is an immediate threat to life, ask others near you for assistance. If no help is available, seek refuge in a stair tower or a room with a window. If the event you are unable to contact security, dial 9-911 to contact the emergency operator.

Building evacuation procedures:

The following procedures are established in order to provide a safe and orderly evacuation of all Pennington Biomedical buildings in the event of a fire, explosion, chemical spill, bomb threat, or any other emergency that would require evacuation. Personnel will be notified when an evacuation is necessary by the automated fire alarm system followed by an announcement

from the security officer via the building paging system. In the event an emergency evacuation is required for reasons other than fire or smoke, the security officer will use the paging system to announce the requirement for all persons to exit the facilities. All personnel will be required to go to the nearest exit and proceed to the designated assembly areas associated with each building.

Each building will have an emergency coordinator and an alternate coordinator who will assist in the evacuation of all personnel to safety outside the building. Once evacuated to the designated assembly area for the building, employees must check in with the building coordinator to verify that they have evacuated.

A list of all building coordinators and meeting locations is in **Attachment 1**. All departments/laboratories within each building should exit to the building's designated meeting location unless otherwise notified.

B. NATURAL DISASTERS (HURRICANES, FLOODS, TORNADOES)

Pennington Biomedical personnel will adhere to the following guidelines for handling natural disasters such as hurricanes, floods, or tornadoes:

1.) Only enter disaster areas if essential.
2.) Do not bring lanterns or torches into buildings that have been flooded or damaged because of the possibility of leaking gas lines or flammable materials.
3.) Do not touch fallen or damaged electric wires.
4.) Immediately leave the area upon discovering a leaking gas line.
5.) Formulate plans to isolate people from potential hazards.
6.) Take shelter immediately when a tornado warning is issued.

Emergency circuits are installed for freezers and refrigerators. The ice machines and walk-in coolers are also on emergency power. However, in a power outage, the center will not have chilled water for air conditioning except for the metabolic chambers, which have emergency power access for air conditioning. In advance of a hurricane, facilities management personnel will inform each laboratory of the emergency circuits to hook up freezers and refrigerators, and will test the generator to ensure the availability of backup power where needed. Pennington Stores personnel will order dry ice in advance of the hurricane. The individual who has been designated the "head" of the following listed areas will be responsible for implementing the severe weather policy.

There is no need to tape windows, since they can withstand 150 mile-per-hour winds.

Metabolic Kitchen

In the event of a hurricane, foods will be cooked in advance and distributed to get volunteers through the storm. Volunteers will report to the Pennington Center for meals

unless streets are unsafe and news reports have warned people to stay home. The kitchen will give one emergency meal to each volunteer in advance of the storm in case there are advisories to stay indoors.

Out-Patient Unit

All volunteers are to be informed as to the status of their appointments and arrangements for picking up their meals. There will be a recorded message if volunteers call informing them of special instructions and information on how to call a study representative if they have any questions.

Inpatient Unit

Research volunteers in the in-patient unit will be sent home in the event of a weather-related closure if practicable. If the in-patient unit must remain occupied, the central area of the unit is the safest and bed-bound volunteers will be moved there. A decision on allowing family members to join inpatient volunteers will be made on an individual basis.

Metabolic Chambers

If there are research volunteers in the metabolic chambers at the time of a weather-related closures, the chief of the metabolic chambers should be notified so that the chamber units can be properly shut down and to send the volunteers home. The chief of the metabolic chambers will notify the principal investigator of the study in which the volunteers are participating.

Comparative Biology

Comparative Biology has a comprehensive Weather Emergency (Hurricane) Disaster Plan in the event of a hurricane and a separate Acute Disaster Plan which covers other natural disasters such as flooding and tornadoes. The Weather Emergency Disaster Plan outlines animal facility preparation at the beginning of hurricane season to ensure adequate food and water supplies throughout the hurricane season. Preparations for a specific hurricane begin 72 hours prior to the expected landfall with specific emergency preparation tasks assigned to occur at 72, 48, and 24 hours prior to the expected landfall. Preparations include marking critical animal cages for evacuation and preparing animals, extra caging, extra Hydropacs and water bottles, and other supplies for the storm. Two emergency personnel are assigned to remain in the animal facility to provide care throughout the hurricane event to provide care to the animals in the event that travel to the Center is prohibited. Investigators with special concerns about their research animals/projects should address them as early as possible with the Director or Assistant Director of Comparative Biology. The Acute Disaster Plan includes provisions to assure that animals are cared for throughout any natural disaster situation while minimizing risks to personnel. Specific items addressed for each type of disaster include animal care (husbandry, food, water, health care), communication, environmental support, security and research support. In general all

animals will be kept in clean housing, provided adequate food and water, and their well-being monitored throughout any disaster. In the event that animals cannot be adequately cared for or are injured or suffering they will be humanely euthanized.

The CBC Weather Emergency (Hurricane) Disaster and Acute Disaster Plans are available on PINE in the CBC folder under Emergency Preparedness (http://pine.pbrc.edu/cmb/emgpln/default.asp) or hard copies can be obtained from the CBC office.

Computer Department

All network data is backed up nightly and monthly backup tapes are stored offsite. The servers in the network operations center are on battery backups that are also connected to emergency power circuits. Two redundant AC units, each powered by a different generator, should continue to provide sufficient cooling during an outage, so long as one of them continues to function. In the unlikely event that both generators (and, in turn, both ACs) fail, then servers and infrastructure equipment would be powered down as temperatures began to rise into unsafe ranges.

Emergency Closure

If necessary for the safety and protection of employees, the Executive Director may announce a closure of all or portions of the Center. In any crisis, common sense should be used for personal safety, and employees should look for and follow instructions in Pennington Biomedical email announcements, the Pennington Biomedical crisis website (http://crisis.pbrc.edu), the crisis voice message phone line (866-412-7272), other campus-wide communications, and/or the news media concerning any Pennington Biomedical closures. Essential employees should report to work if there is no danger to their travel.

Personnel Communication

Employees should watch or listen to news bulletins and follow instructions for Pennington Biomedical employees unless advised otherwise. In the event the facility closes, a message will be posted to the crisis website: http://crisis.pbrc.edu. Information can also be obtained by calling 1-866-412-7272. Essential personnel should report if necessary if there is no danger to their travel.

C. BOMB THREATS

Every bomb threat should be taken seriously and the following procedures should be followed:

General Guidelines:

1.) Do not let the caller know you are shocked, excited, or nervous. In most cases, the call is a hoax and the caller gets his "kicks" by a fearful or excited reaction.
2.) Keep the caller on the phone as long as possible. This increases the chances he can be identified or the bomb threat determined to be a hoax.
3.) Pretend you are unconvinced that there is a bomb. Make the caller convince you. This buys time.
4.) Listen for background noises you can identify – music, traffic, motors, etc.
5.) Notice any speech impediment, accent, and diction, misuse of a word, uncommon phrase, or speech pattern that distinguishes the caller.
6.) Do not hesitate to ask questions. Alertness may help locate a bomb or establish that the call is a hoax.

Specific Questions:

Ask that each sentence be repeated:

1.) "Who is calling, please?"
2.) "How can I believe you? What does it look like? Where is it?"
3.) "Why would you want to put a bomb here?"
4.) "Do you realize a bomb could hurt or kill people?"
5.) "How can we stop it from exploding?"
6.) "What did you say your name is?"
7.) "Where are you calling from?"

Note the time of the call and the number at which the call is received.

Procedure:

1.) Obtain all information possible.
2.) Call the security officer at 3-2508. 911 will be advised immediately.
3.) The officers will conduct a search of the facility.

If a bomb is located, call Louisiana State Police Explosive Control Unit at 925-6326 or 925-6179. Employees who answer calls on general telephone lines for the Center must be trained on these guidelines.

D. ANTHRAX AND OTHER BIOLOGICAL AGENT THREATS

In the past, facilities around the country have received anthrax threat letters. Most are empty envelopes, while some contain powdery substances. The point of origin for most of these situations would likely be the mailroom. The following procedure should be followed to handle such incidents.

Suspicious unopened letter or package marked with threatening message:

1.) Notify the security office at 3-2508.
2.) Do not shake or empty the contents of any suspicious envelope or package.

3.) Place the envelope of package in a plastic bag or some other type of container to prevent leakage of the contents.
4.) If you do not have a container, then cover the envelope or package.
5.) Leave the room and close the door, or section off the area to prevent others from entering.
6.) Wash your hands with soap and water to prevent spreading any powder to your face.
7.) Make a list of all people who were in the room when the suspicious letter or package was recognized, and give this list to the authorities.

Envelope with powder and powder spills out onto surface:

1.) Do not try to clean up the powder.
2.) Cover the spilled contents immediately with anything and do not remove this cover.
3.) Leave the room and close the door, or section off the area to prevent others from entering.
4.) Wash your hands with soap and water to prevent spreading any powder to your face.
5.) Notify the security office at 3-2508.
6.) Remove heavily contaminated clothing as soon as possible and place in plastic bag or container that can be sealed.
7.) Shower with soap and water as soon as possible.
8.) Make a list of all people who were in the room when the suspicious letter or package was recognized, and give this list to the authorities.
9.) If there is a question of contamination by aerosolization, turn off local fans or ventilation units in the area, and the air handling system in the building.

How to identify a suspicious package or letter:

1.) Excessive postage
2.) Handwritten or poorly typed address
3.) Incorrect titles
4.) Title but no name
5.) Misspellings of common words
6.) Oily stains, discolorations or odor
7.) No return address
8.) Excessive weight
9.) Lopsided or uneven envelope
10.) Protruding wires or aluminum foil
11.) Excessive security material such as tape, string, etc.
12.) Visual distractions
13.) Ticking sound
14.) Marked with restrictive endorsements such as “personal” or “confidential”
15.) Shows a city or state in the postmark that does not match the return address

E. HAZARDOUS CHEMICAL SPILLS

ACIDS: Hydrochloric Acid (38%)
Nitric Acid (71%)
Phosphoric Acid (87%)
Sulfuric Acid (98%)
Perchloric Acid (72%)

The above acids can cause serious and painful burns to exposed skin or eyes. In case of contact, immediately flush eyes or skin with plenty of water for at least 15 minutes while removing contaminated clothing or shoes. Call a physician immediately.

Spills of concentrated acids evolve irritating and harmful fumes. It is recommended that an approved respirator or self contained breathing apparatus be worn in confined areas (available on each floor of research building). Otherwise, insure adequate ventilation. Neutralization of concentrated acids produces heat. Allow two minutes between treatment steps for the dissipation of heat. Do not step into spill material.

When using a Spill Clean-Up Kit, wear the gloves and safety glasses provided in the kit. In addition, it is recommended that a lab coat and plastic apron be worn. DO NOT USE ON ACIDS NOT LISTED ABOVE.

PROCEDURE:

1) Open the carton of acid neutralizer
2) Apply acid neutralizer to the spill from the perimeter inward, applying sufficient neutralizer to obtain a uniform color change throughout. Foaming will begin, indicating neutralization is proceeding. After foaming subsides, proceed to next step.
3) Note the color of the slurry:
   Red/Pink-highly acidic. HAZARDOUS
   Yellow/buff-slightly acidic HAZARDOUS
   Blue/Green-safe
   If the slurry color indicates an acidic condition (may be encountered in spill of concentrated acids), carefully add water and additional acid neutralizer. Mix thoroughly with the plastic scoops provided until a persistent blue/green color appears. Do not proceed until foaming has ceased.
4) Pick up the neutralized spill material with the scoops and transfer to the plastic disposal bag provided. Wipe up any residual neutralized spill material with the sponge (moistened) provided
5) Place used sponge, scoops, and gloves in the disposal bag and twist seal with the bag tie provided. Fill out the disposal label, peel off backing and affix to the bag.
6) Dispose of bag and contents in the hazardous waste room; attach a PBRC Hazardous Waste slip.

BASES: Ammonium hydroxide (aqueous)

Potassium hydroxide (aqueous)
Sodium hydroxide (aqueous)

Caustic substances can cause severe and painful burns to exposed skin and eyes. In case of contact, immediately flush eyes or skin with plenty of water for at least 15 minutes while removing contaminated clothing and shoes. Call a physician immediately.

Some caustics, notably ammonium hydroxide, evolve irritating fumes. For spills involving these materials, insure adequate ventilation before beginning neutralization and cleanup. In cases involving 30% or greater ammonium hydroxide, it is recommended that the user wear a respirator or self-contained breathing apparatus.

Neutralization of concentrated caustics produces heat. Observe appropriate precautions when handling hot slurry materials. Do not step into spill material.

When using a spill clean-up kit wear the gloves and safety glasses provided in the kit. In addition, it is recommended that a lab coat and plastic apron be worn.

PROCEDURE:

1) Open the box of base neutralizer and apply to the caustic spill from it perimeter inward to dike and completely absorb the spill. A color change from yellow to blue signifies caustic material (hazardous). Additional cool tap water to aid absorption and color reaction if absorption is slow or spill material is concentrated.
2) Thoroughly mix the slurry with the scoops provided until it changes to a yellow/yellow-green color (neutralized). Add additional acid neutralizer and/or water if necessary to obtain color reaction and desired slurry consistency.
3) Scoop up the neutralized material and place in the plastic disposal bag provided. Wash the spill area with the sponge provided for final cleanup. Place used scoops, sponges, and waste residuals in the plastic disposal bag and twist-seal with the bag tie provided.
4) Fill out the disposal label, affix to bag, and dispose of in the hazardous chemical storage room. Attach a Pennington Biomedical Hazardous Waste Label.

FLAMMABLE SOLVENTS**:** Immediately remove all sources of ignition from the spill area. Immediately provide maximum ventilation. Avoid excessive inhalation of vapor or contact of skin with solvent. Use a solvent spill clean-up kit. Do not use for the cleanup of strong oxidizers, including peroxides, or other highly unstable organic compounds. Wear the gloves and safety glasses provided in the kit.

PROCEDURE:

1) Open the carton of solvent absorbent.
2) Apply sufficient solvent absorbent onto the spill to absorb all of the solvent.
3) Thoroughly mix the solvent absorbent and solvent with the scoops provided until the solvent absorbent regains its appearance a dry, free running, non-adhering granular material. If a strong odor persists, add additional solvent absorbent.

4) Pick up the saturated solvent absorbent with the scoops and transfer it to the plastic disposal bag provided.
5) Place used scoops and gloves in the disposal bag and twist seal with the tie bag provided. Fill out the disposal label, peel off backing, and affix to the bag.
6) Dispose of the bag and contents in the PBRC Hazardous Waste Storage Room; attach a PBRC Hazardous Waste Label.

F. RADIATION SPILLS

Minor Spills:

Incidents which involve the release or spillage of less than 100 microcuries (μCi) of the radionuclide can generally be considered as "minor" spills. In such cases:

- Notify all other persons in the room at once.
- Clear room of all persons except those needed to deal with the spill.
- Confine liquid spills by dropping absorbent media on the spill area.
- Confine solid spills by dampening and covering the spill area carefully and thoroughly. Do not spread the contamination.
  - Use water, unless chemical reaction would release airborne contaminants.
  - Use oil otherwise.
- Notify the laboratory supervisor/principal investigator in-charge.
- Notify the Radiation Safety Office at 578-2008/578-2747.
- After normal business hours, notify the Campus Police 578-3231.

Major Spills or Release:

Incidents which occur outside a fume hood and involve the release or spillage of more than 100 microcuries (μCi) of the radionuclide should be considered "major" spills. In such cases:

- In the event of suspected personal contamination, refer to Personal Contamination section below.
- Evacuate the spill area immediately. Keep all persons who were present during the spill at a nearby, low-traffic, safe location.
- Contain the spill to minimize the spread of the contaminant.
- Secure the area with conspicuous notice.
- Notify the laboratory supervisor/principal investigator in-charge.
- Notify the Radiation Safety Office at 578-2008/578-2747.
- After normal business hours, notify Campus Police at 578-3231.
- Wait for assistance.

Personal Contamination:

- Notify Radiation Safety Office immediately at 578-2008/578-2747. After normal business hours, notify Campus Police at 578-3231.
- Remove all contaminated personal objects (lab coat, gloves, clothing, shoes, etc.) and place them into a labeled radioactive waste bag.
- Measure and record the amount of contamination on the contaminated part of your body with a survey meter, if applicable.
- Wash the contaminated area with mild soap and water.
- Repeat washing as necessary.
- Never Impede or Delay Medical Assistance.

G. CRIMINAL BEHAVIOR

Recently, armed intruders have resulted in an alarming number of injuries and deaths on college, university and high school campuses. Usually an intruder is an angry student or employee or someone from off-campus who is extremely upset with a specific student, faculty or staff member. However, armed intruders can also include several individuals, such as members of a gang or persons who are bound together by a common cause or grudge.

Although the motive of the intruder(s) might be to kill or injure a single individual, events that involve armed intruders often escalate to include large numbers of people, including the taking of hostages.

Security personnel shall be notified immediately and will contact Baton Rouge City Police Department and relay events with as many details as possible. Security will notify the Executive Director or the highest ranking person available in the Administrative offices in any cases involving known or suspected armed intruders. Depending on the circumstances and time of the event, it may be determined by the Executive Director or his representative to be necessary and feasible to convene the Emergency Response Team to assist with response activities, including making a decision to initiate lock-down procedures. Under circumstances where a delay in seeking direction from the Executive Director or the ERT would result in significant risks to the lives of the Pennington Biomedical community, lock-down procedures will be initiated immediately by Security.

However, in any cases involving the need to initiate lock-down procedures, the Executive Director will be notified immediately as well as the ERT. If possible the ERT will be asked to convene in the Emergency Operations Center to provide further direction with regards to PBRC response activities. Lock down procedures will include: immediate securing of all campus buildings by computer and physical locking mechanisms, announcements through overhead paging system alerting all employees to shelter in secured rooms interior rooms if possible until further notice, notification of ERT members and posting signs indicating that a lock-down is in place.

If armed intruders are present on campus, the Baton Rouge Police Department and other local and state law enforcement agencies will be contacted immediately by Security (or through a 911 call from an individual). Security will serve as the liaison with off campus law enforcement officials and assist with the coordination with other PBRC units and the ERT.

1. What to do if you suspect an event involving an armed intruder may possibly occur at Pennington Biomedical:

a. Notify Security if you are aware of any threats or have other information that makes you suspect an event involving an armed intruder might be possible.

b. Trust your instincts. Better to be wrong than to ignore warning signs of possible tragic events.

2. What to do if you know or suspect an armed intruder is present on campus:

a. Call Security and/or 911 and provide the information requested. Stay on the line until being told that it is okay to disconnect.

b. If indoors, remain in your room, behind a locked door (if possible) and away from windows. If you suspect an armed intruder is in close proximity, try to find a safe hiding place.

c. If outdoors, find refuge in a nearby building.

d. Remain calm and quiet.

e. Wait for police to arrive.

f. If instructed by authorities to evacuate a building or the campus grounds, follow directions exactly.

g. If you should witness any injuries or deaths, identify yourself to authorities as soon as it is safe to do so.

h. Get as much physical description as possible, approximate height, weight, race, hair color, clothing, vehicle description in a safe manner.

3. What not to do if you know or suspect an armed intruder is on campus:

a. Do not leave your room to try to "see what's happening".

b. Do not confront or try to apprehend the intruder.

c. Do not assume that someone else has called the security office and/or 911.

d. Do not sound the fire alarm. A fire alarm would signal the occupants to evacuate the building and thus place them in potential harm as they attempted to exit.

e. Contact Security if you have any information to share about the incident.

After an immediate crisis involving an armed intruder, the Emergency Operations Team will meet to discuss the event and determine if anything needs to be done to improve campus safety and security. The Communications Director will work with the Executive Director to determine how news of the event and related issues involving campus safety and security should be communicated to the Pennington Biomedical community, media, family of employees, participants, donors and other external groups.

H. EXPLOSION

If there is an explosion at the center, this should be immediately reported to Pennington Biomedical security. Security will determine what action(s) should be taken and may include evacuation of the building, notification of Baton Rouge Police and Fire Department, as well as any other agency that would be needed in assisting with the situation. Also, the maintenance department will be contacted immediately.

Environmental support: Facilities management is responsible for maintaining environmental control functions. During their evaluation if the Director or Assistant Director recognize environmental problems these will be reported to Facilities Management for a response.

Security: Pennington Biomedical Security personnel will check the facility perimeter for bomb or fire damage and that all doors are intact and locked.

I. HOSTAGE TAKING

Any incidents that involve the possibility of a hostage will be immediately reported to Pennington Biomedical security. Security will determine validity of claim and will alert Baton Rouge City Police as soon as incident is verified. They will also determine what actions should be taken that may include evacuation of certain areas, as well as locking down certain buildings and areas.

J. INFECTIOUS DISEASE OUTBREAKS

A communicable disease is an infectious disease that is spread from person-to-person through casual contact or respiratory droplet, to include, but not exclusively, the following: Tuberculosis (TB), measles (Rubella), German measles (Rubella), hepatitis, meningitis, and the many different subtypes of Type A influenza viruses.

If an outbreak occurs the Executive Director will contact the East Baton Rouge Public Health Department to obtain the latest recommendations about the management and prevention of the spread of the specific strain of communicable microbe, requesting appropriate vaccines and/or medications, as well as requesting additional professional and clerical assistance, if deemed necessary.

All available health professionals will monitor the index cases, look for linked cases, and provide appropriate diagnostic, prophylactic, and therapeutic measures to the affected individual(s). Although the route of transmission and degree of infection varies depending on the specific infectious disease, individuals with the following relationships to the index case will be educated about the disease in question to the extent possible respecting confidentiality.

Faculty and staff will be told to report any signs and symptoms of the illness to their private physician, where they can be seen, to receive a confidential medical consultation, appropriate treatment, and/or referral to community health organizations, as medically indicated.

K. MEDICAL EMERGENCY

For medical emergencies, refer to **Attachment 3 – On-site Medical Emergency Standing Orders**.

L. UTILITY FAILURE OR EMERGENCY

Any problems involving utility failures or emergencies will immediately be reported to PBRC security department who will in turn contact Pennington Biomedical maintenance department. The Pennington Biomedical maintenance department will contact appropriate personnel.

M. INJURY

When anyone has an accident, regardless of how minor, the attached "Report of Incident/Injury" form (PBRC #026 for employees and #027 for non-employees) is to be completed in consultation with the person involved at the earliest possible opportunity after the incident/injury takes place. When an employee has an incident, the employee should report to the Inpatient Unit for assistance and the nurse/physician will complete the Accident and Body Fluid Exposure packet and follow the recommendations on the check list (SOP 1003: Employee Accident/Injury and Body Fluid Exposure Program).

PBRC SECURITY DEPARTMENT
MAIN PHONE LINE: 763-2508
CELL PHONE: 445-2834

ATTACHMENT 1: FIRE – BUILDING COORDINATORS – MEETING LOCATIONS

Fire Drill

Building B

Coordinator: Anne Duke
Alternate: Keisha Hawkins

Area coordinators

Gabby Dominguez – Keisha Hawkins	- mailroom to east side of building on 1st floor, including meeting rooms
Sharon Hebert - Annette Potter -	business office to west side of building on 1st floor, including HR and Fiscal Operations
Lori Steib – Anne Duke	library to east side of building on 2nd floor, including Executive suite and meeting rooms
Barry Buchanan – Clint Duffy-	west of library on 2nd floor, including IRB, and Computer Admin.

Building C

Coordinator: Paige McCown
Alternate: Steve Lee

Area coordinators

C1012	Shawna Wicks	C2002	Tuomo Rankinen
C1026	Jennifer Terrebonne	C2004	Tuomo Rankinen
C1038	Anne Raggio	C2008	Tuomo Rankinen
C1044	Empty	C2026	Tuomo Rankinen
C1047	Jonathan Savoie	C2030	Ann Coulter
C1052	Marina Duvall	C2038	Jason Walker
C1054	Paige McCown	C2046	Empty
C1055	Empty	C2049	Empty
C1061	Steve Lee	C2052	R Rogers/G Hermann
C1067	Valery Hymel	C2058	Empty
C1081	Jessie Boyer	C2066	Empty
C1096	Abby Altazan	C2072	Stacey Roussel
C1097	Kevin McKlveen	C2077	Laura Holloway

Building D

Coordinator: Celeste Waguespack
Alternate/area coordinator: Aimee Alumbaugh – check inpatient and 2nd floor

Pediatric Clinic: Security

Building E

Coordinator: Cindy Kloster
Alternate: Marleny Mercedes

Building F

Coordinator: Dwayne Lambert
Alternate: Thad Sechrist

Buildings G, H, J, K,

Coordinator: Laura Jordan
Alternate: Darryl Lejeune

Area coordinator

G1039-G1051	Laura Jordan
G2004-G2013	Julie Van Scotter
G2058-G2078	Heidi Millet/Melissa Harris
G3024-G3041	Tessa Mahler, Jenny Jackson
G3044-G3064	Nick Broskey/Jasper Most

Building L, H, J

Coordinator: Laura Dallam
Alternate: Nancy Pease

Area coordinators

L1010	Cathy Huey; Doug Braymer	L3007	Allison Richard/Richard Carmouche
L1005	Christy White	L3021	Empty
L1035	Lauren Giffin/Tim Nguyen	L4003	Jennifer Adair/Allison Vestal-Laborde
L1052	Ricky Caro	L4019	Jennifer Adair/Allison Vestal-Laborde
L2004	Gail Effler-Braymer	L4030	Empty
L2018	Laura Dallam	L4047	Leigh Townsend
L2029	Anik Boudreau	L4058	Dee Williams
L2045	Caitlin Hebert	L4068	Sun Fernandez-Kim/Claudia Kruger
L2059	Cindi Tramonte	L5007	Empty
L2069	Cindi Tramonte	L5019	Empty

Fitness Center Sheletta Donatto, Callie Hebert

Building M

Coordinator: Mandy Shipp
Alternate: Melissa Lingle

Area coordinators

Medical records 1st floor	Melissa Lingle
Medical offices, exercise testing	Mandy Shipp
All clinic rooms 1st floor	Robert Leonhard
M1019-M1028 Imaging area	Alexis Adams
M2007, M2009-M2011, M2048, M2059	Rachel Romaine
M2012-M2015	Amanda Staiano
M2016-M2035 offices/corridor	Amy Thomassie
M2039-M2040, M2041-M2046, M2051-M2058	Karissa Elsass
M2068-M2070, M2072-M2073	Heather Foil
M2079 offices/corridor, M2060-2066, M2077	Jennifer Arceneaux
M2093-M2101, M2036	Greta Fry
PM and LSU ICON-4th floor	Stacie Davis
Remainder of 4th floor	Kieu Pham/Lisa Landry

Building N

Coordinator: Kori Murray
Alternate: Julia St. Amant

2nd Floor-Coordinator:

Security

Coordinator: Scott Bertrand – check pharmacy and 1st floor of Bldg. D
Alternate: Karen Quebedeaux

Staging area locations

Building B – Administration – meet at the front fountain and report to Anne Duke

Building C – Lab building:

(a) Labs from 1052 and 2052 towards the west side of the building exit out of the doors going to CBC and meet in the Quail lot on the Perkins Rd. side and report to Marina DuVall.

(b) All labs initially exit out of the door by the atrium then through the door leading outside between Bldg. L and Bldg D and meet by the Gazebo behind Bldg. L and report to Paige McCown

(c) Labs C1081, C1096, C1097 - Clinical Chemistry and MRI Suite – exit through the C building door that leads outside between Bldg. L and Bldg. D and meet by the Gazebo and report to Paige McCown

Building D – Inpatient Unit, Security, Pharmacy, Pediatric Clinic – meet in the field across the drive from Building D with all area coordinators reporting to Celeste Waguespack

Building E – Comparative Biology – exit the back of CBC area and meet near Onion Blvd. and report to Cindy Kloster

Building F – Maintenance – meets in the Quail lot on the Perkins Rd. side and report to Dwayne Lambert

Buildings G, K – Conference Center/Apartments– meet at the walkway to Bldg. K (Gazebo) and report to Laura Jordan

Building J, L – Basic Sciences and Fitness center – meets in the parking lot on west side of building, towards the apartment building and report to Laura Dallam

Building M, N 1st floor– New Clinic Building – meets in the parking lot in front of the new building and report to Mandy Shipp **EXCEPT** the Kitchen staff will meet in the field across the drive from Building D and report to Celeste Waguespack.

Building N-2nd floor- meets in the parking lot in front of N building and report to coordinator.

ATTACHMENT 2: ANIMAL RIGHTS ACTIVIST CRISIS PLAN

PURPOSE

This plan is intended to prepare Pennington Biomedical Research Center faculty and staff for an animal rights threat or crisis at the Center. This plan sets forth a strategy for preventing, preparing for, and responding to any inquiry or crisis involving animal rights activist. [See also PBRC Policy No. 241.00].

POLICY/PROCEDURE

The use of animals is essential to our research mission. The Center recognizes that the use of animals in research carries an obligation for appropriate care and use. Therefore, each staff member, student, faculty member, and research scientist is responsible to promote and protect animal welfare within the research programs of the Center. This responsibility should be conveyed by training and example of present and future employees.

CRISIS PREVENTION:

When properly executed and communicated, responsible and appropriate animal care and use programs serve to prevent but do not eliminate the risk of a crisis involving animal rights activists.

The Center strictly adheres to the Public Health Service Policy on Humane Care and Use of Laboratory Animals. The basic tenets of this policy are covered in the Comparative Biology orientation program. Faculty and staff that use laboratory animals in their research programs should be fully aware of the Center's policies and procedures regarding their use. It is critical that the Center and all personnel be responsive to concerns raised about animal care and use at the Center. As required by the Public Health Service Policy on Humane Care and Use of Laboratory Animals and elaborated in the Centers PHS Assurance document, any animal welfare concerns expressed by faculty, staff, students, or the public should be reported to the Director of Comparative Biology, the Associate Executive Director for Basic Science, and/or the Chair of the PBRC Institutional Animal Care and Use Committee. Such concerns will be investigated and reviewed by the IACUC and appropriately addressed.

All persons using the Comparative Biology Core are responsible for Core security. Only authorized personnel should be allowed access to the Core. Visitors to the Comparative Biology Core must receive prior approval from the Director or Assistant Director of Comparative Biology, or the Associate Executive Director for Basic Science. Photography involving laboratory animals must be pre-approved by Director or Assistant Director of Comparative Biology, or the Associate Executive Director for Basic Science.

PRE-CRISIS PREPARATION:

The Comparative Biology Core will assemble the following documents and provide them to the Director of Communications and the Associate Executive Director for Basic Science:

1. Policy and procedures on laboratory animal care and use at PBRC.

2. The Public Health Service Policy on Humane Care and Use of Laboratory Animals

Media and Other Inquiries Regarding Animal Care and Use:

Any Pennington Biomedical scientist or employee contacted by the media or other unfamiliar person inquiring about animal care and use at the Center should direct the inquirer to the Communications Director. The response to such inquiries will be formulated in consultation and approved by the Executive Director, the Director for Basic Science, and the Director of Comparative Biology. The Communications Director will be responsible for directly interacting with the media to address such inquiries.

CRISIS RESPONSE:

If an animal rights demonstration is staged at the Center the following plan should be implemented.

1. Notify Pennington Biomedical Security, the Director and Assistant Director of Comparative Biology immediately (see attached "Security Plan for Demonstrations on Campus) and the Communications Director.

2. Pennington Biomedical employees should avoid confrontation with demonstrators.

3. The Director or Assistant Director of Comparative Biology will convene a meeting to discuss the incident including the Executive Director, the Director for Basic Science, the Assistant Director of Security, and the Director of Operations.

4. If a media response is necessary the Communications Director will work with the Director of Comparative Biology and the Director for Basic Science to address any media inquiries.

5. The Assistant Director of Security will develop a response to ensure the safety of PBRC personnel.

In the event a crisis such as a break-in or vandalism is discovered in the Comparative Biology Core, the person discovering the problem should notify Pennington Biomedical Security and the Director and Assistant Director of Comparative Biology immediately. The following plan will be engaged.

1. Pennington Biomedical Security will be responsible for notifying public law enforcement authorities.

2. Basic facts of the incident; who, what, when, where, how, etc., will be collected by Pennington Biomedical Security, the Director and Assistant Director of Comparative Biology.

3. The Director or Assistant Director will report the incident to the Executive Director and Director for Basic Science and convene a meeting including the Assistant Director of Security, and the Director of Operations to relay basic facts of the incident.

4. Basic facts of the incident will be confirmed at this meeting and used to develop a media response to be delivered by the Director of Operations, if warranted. Pennington Biomedical security and/or law enforcement officials must be consulted prior to making any media statements that might hinder/jeopardize a criminal investigation.

5. The Communications Director will work with the Executive Director to make a timely media statement, as apporpriate.

6. Other Pennington Biomedical personnel questioned by the media should decline comment and direct inquiries to the Communications Director.

7. The Assistant Director will work with Comparative Biology Core staff to survey the area and secure any animals that may be freed from their caging. Care should be taken to minimize disturbing the affected area until law enforcement officials have completed their investigation.

8. Pennington Biomedical security will work with other law enforcement agencies during the investigation of the incident.

9. All (including Pennington Biomedical security and law enforcement) must understand the animals must be cared for regardless of an investigation.

In addition to facts of any specific incident that might be reported, responses to media questions concerning laboratory animal care and use at the Center should be coordinated with the Communications Director to include the following points:

1. The Center adheres to the Public Health Service Policy on Humane Care and Use of Laboratory Animals as required by the National Institutes of Health Office of Laboratory Animal Welfare.

2. As a key part of our compliance with the PHS Policy a veterinarian with specific training and expertise in laboratory animal medicine directs and oversees the care of all laboratory animals at the Center.

3. The Center's animal care program is accredited by the Association for Assessment and Accreditation of Laboratory Animal Care International. This accreditation is considered the "gold standard" for excellence in laboratory animal care.

4. The use of laboratory animals is critical to the accomplishment of our research mission "to promote healthier lives through research and education in nutrition and preventive medicine."

5. If questions concerning what species of laboratory animals are used at the Center – our laboratory animal use is restricted to mice and rats, and occasionally rabbits.

ATTACHMENT 3: ON-SITE MEDICAL EMERGENCY STANDING ORDERS

Purpose

The following emergency response procedure will be followed in the event of a medical emergency occurring at Pennington Biomedical Research Center.

Responsibility

This applies to all Pennington Biomedical staff.

Procedure Steps

A. Specific Emergency Measures
   - Life Threatening Emergencies
   - Non-Life Threatening Emergencies

B. Documentation
C. Certification
D. Competency Assessment

Procedure Steps in Detail:

A. Specific Emergency Measures

In the event of any medical emergency employees should determine whether it is a life threatening or non-life threatening situation and follow the steps listed below. And calls placed to 911 on a Pennington Biomedical landline will automatically notify security with the location the call originated from. If 911 is dispatched using a cellular phone, security will need to be notified as well and given the location and details of the emergency.

- **In the event of a life threatening emergency:**
  - The first responder (first person to the scene) will call 911 and give location and nature of emergency.
  - They will call Security at 763-2508 and give locations and details.
  - The first responder will return to the victim to start CPR. Once trained staff arrives, they will begin ACLS.
  - Security will page "Code Blue" via overhead system and give location of emergency.

- Security will verify 911 has been contacted. If not, 911 shall be contacted immediately and given location and details.
- Security will meet EMS and direct to the location of the emergency. Security staff will stay with emergency personnel until they have exited the campus.

- **In the event of a non-life threatening emergency**:
  - The first responder will call the Clinic front desk at 763-2672 for an available MD and give location and details of emergency.
  - If there is no response, the person will call security at 763-2508.
  - If they are unable to reach the Clinic front desk or security they will call the inpatient unit at 763-2678.

  - If security is contacted they will page via overhead, "any available medical personnel" and give location of emergency. They will also call the Inpatient unit and give details of the emergency in order for personnel to bring proper equipment.

To provide for personal safety, CPR providers should use pocket masks which are stored in the following locations:

- On the spill kits outside each laboratory
- The front desk of the Administration building
- Security (M and D buildings)
- By the AED's (Fitness Center, C-Building hallway by C1096, Conference Center, 2nd level hallway, outside exercise testing room M1037, and Inpatient Unit – 2nd floor of Clinic.)

In life threatening emergencies, qualified medical personnel should initiate life-saving measures based on CPR/ACLS standards and protocols. These measures include:

- Assess the situation and initiate CPR/ACLS protocols as needed.

Crash Carts are located in the following areas:

- Outpatient Clinic (1st floor of 'M' bldg.)
- Inpatient Unit Nurses Station (2nd floor of D Bldg)
- Fitness Center (in the Exercise Testing Room)

AED's are located in the following areas:

- Hallway outside the Clinic Exercise Testing Room (C1096)
- Hallway M1068A (outside of exercise Testing Room M1037)
- Fitness Center in hall outside the gym
- Inpatient Unit, second floor of clinic at nurse's station
- Conference Center, 2nd level hall, near West Reception Offices
- Pediatric Unit

- Hallway Between Buildings C and L

- Inpatient Unit Staff will bring the crash cart/box to the location of the emergency unless the emergency is in the Outpatient Clinic or Exercise Facility. (Inpatient Unit Staff will notify Security if the unit will be closed in which case Security will be responsible for bringing an AED to the location.)

- Diagnose rhythm per cardiac monitor (or AED if available) and begin treatment, including defibrillation, according to ACLS protocol.

- Code leader to provide sequence of events to EMS personnel upon their arrival.

In the event of a non-life threatening emergency, medical personnel arriving at the scene should assess the situation and determine the appropriate course of action.

- Provide basic first aid.

- If first aid measures are not sufficient:

  - ***Employees*** with minor injuries should be offered treatment at the Occupational Medical Clinic located at 3333 Drusilla Lane (phone number 225-924-4460). Hours of operation are Monday through Friday 7am – 5pm. If emergency occurs Monday through Friday between 5pm and 11pm (or Saturday/Sunday between 9 am and 11 pm) the employee should go to the Lake Afterhours Clinic located on Drusilla Lane next to the Occupational Medical Clinic. If treatment is accepted a coworker should transport the injured employee. Complete and bring the following form: *(Occupational Medical Form)*

  - ***Study volunteers or visitors*** with minor injuries should be referred to the medical facility of their choice for treatment.

  - For ANY major injuries, EMS should be contacted to provide transportation to the nearest Emergency Room.

B. Documentation

- **For Non-Life Threatening Emergencies:**
  - Employee Injury: Employee will follow the Accident & Injury SOP 1003 and will complete the Incident/Accident Form: Employee. Security will make two copies and forward one to the Inpatient Unit and the other to the Safety Officer the same day as incident or first thing the following day if occurred after hours.

- Subject/Visitor Injuries: Employee who witnessed the event or designee will complete documentation on the Incident/Accident Report: Subjects/Visitors/Others (Form PBRC 027) *(Subject/Visitor Injury Report).* Security will make two copies and forward one to the Inpatient Unit and the other to the Safety Officer the same day as incident or first thing the following day if occurred after hours.

- **For Life Threatening Emergencies:**
  - Code Leader assigns staff member to document events during the code.
  - Identified staff member documents vital signs, rhythms, medications/treatments administered.

C. Certification

- The Nursing Manager will maintain records of staff certifications for CPR/ACLS and will coordinate certification classes to keep all personnel appropriately trained.
- All staff working in the clinic and exercise facilities will be trained in CPR and will provide appropriate intervention in the event of a life threatening emergency.
- All personnel will be encouraged to attend CPR training which will be provided by CPR Instructors on staff at Pennington Biomedical.
- All medical personnel (MD's, NP's, PA's, RN's and selected LPN's) will be trained in ACLS and will direct life-saving efforts until the arrival of EMS personnel

D. Competency Assessment

- Semi-annual skills reviews will be conducted by appointed personnel for all PBRC emergency responders to maintain proficiency between training courses which are required every two years.
- CPR/ACLS training will be offered on site several times throughout the year. Staff will be allowed to attend more frequently than the AHA recommended every two years if desired.