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# Teddy Bear Triage and Treatment: Novel Technique of Mass Casualty Incident Education

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## Background

- Training Emergency Medicine residents in the management of a mass casualty incident is an ACGME program requirement.<sup>1</sup>
- Large scale drills involving patients require excessive logistical and financial costs.
- UCI Bike race required rapid training of residents in triage.
- SALT Triage was developed by the US Center for Disease Control in 2008<sup>2</sup> and has been endorsed by multiple, multidisciplinary agencies.<sup>3</sup>
- This method has also been shown to require only minimal training with medical learners to be applied effectively.<sup>4</sup>

## Objectives

- Primary objective: Rapidly train providers in SALT Triage.
- Secondary objective: Develop a low cost, time efficient, and easily reproducible mass casualty incident educational model.



Figure 1: Participants triage and treat a multiple amputee victim

## Instructional Methods

- Rotating teams of residents received “just-in-time” type training on the SALT triage method and simulated supplies for life saving procedures.
- The triage exercise included 15 stuffed bears (“carnival grade”, \$0.75/bear) moulaged using inexpensive supplies to simulate injuries with information tags that included adequate information for triage arranged to simulate a blast scene (Figures).
- Teams were given 15 minutes to complete the scenario and scored based on correct triage decisions and proper life saving procedures.
- Teams were debriefed on the correct triage category and life saving procedures.

## Outcomes

- Forty residents were successfully introduced to the SALT triage technique in a 2-hour block.
- Triage and treatment accuracy were consistent with previously reported measures.
- Informal resident feedback indicated that the exercise had improved their working knowledge of triage in mass casualty incidents.
- The model was created with a cost of approximately 4 hours and \$35.
- All materials were prepared prior to the event, easily transported, and placed on the day of the event.



Figure 2: Evisceration model with associated information tag

## Discussion

- This instructional method was well received by the learners and resulted in a clinically acceptable application of triage and treatment interventions.
- This model could be easily replicated with minimal resources.
- Future study could include pre- and post- test knowledge of the SALT system and testing of long-term retention.

## References

1. ACGME Program Requirements for GME in Emergency Medicine 2016.
2. Lerner EB, et al. Mass casualty triage: an evaluation of the data and development of a proposed national guideline. Disaster Med Public Health Prep. 2008 Sep;2 Suppl 1:S25-34.
3. SALT mass casualty triage: endorsed by ACEP, ACS-COT, ATS, NAEMSP, NDLS Education Consortium, and State and Territorial Injury Prevention Directors Association. Disaster Med Public Health Prep. 2008 Dec;2(4):245-6.
4. Lee CW, McLeod SL, Peddle MB. First Responder Accuracy Using SALT after Brief Initial Training. Prehosp Disaster Med. 2015 Oct;30(5):447-51.