San Bernardino Mass Shooting
December 2, 2015

SAN BERNARDINO MASS SHOOTING
• Two shooters armed with AR-15 style assault rifles enter the Inland Regional Center in San Bernardino and open fire on a group of San Bernardino County employees gathered at the Center for a training meeting and holiday luncheon.

ORIGINAL SHOOTING TIMELINE
• First 911 call at 10:58 – “Shots heard in the area”
  • Almost immediately followed up by multiple calls of a shooting – elevated to an active shooter
• Multiple suspect descriptions were given…
  • 1-3 suspects (+possible get away driver)
  • White or Hispanic male suspects
• Suspects were in and out in about 2-3 minutes
  • 160+ 223 rounds fired (2 guns used)
  • 14 people killed
  • 22 people wounded
• Determined to be a “terrorist event”.

EVENT DETAIL
• SB County Department of Public Health training and end of year event.
  • 80+ County Employees present
• Syed Farook was present all morning - alone
  • Left the gathering sometime around 10:36AM
  • Left a bag on a table – center of the room
  • Later determined to contain a homemade RC IED
• Two Suspects enter at approximately 10:58 and open fire

INLAND REGIONAL CENTER

POLICE RESPONSE
• Most wounded victims extracted by police officers
• Pick-up truck transport – Triage center across the street
• All but two victims extracted from the building are transported and survive (2 died in triage area).
• Hundreds are evacuated from the three buildings.
**POLICE RESPONSE**
- Nearly 300 officers within 2 hours
- 10 local police agencies
- 4 FD's responded
- FBI
- ATF
- DHS
- US Attorney
- Regional Task Force Teams

**KEY LOCATIONS**

**ISSUES RAISED DURING INTERNAL DEBRIEFS**
- Medical Aid Response
  - Fire Department – Police Department cross training
  - Regional Debate – Fire Industry Standards
  - Tactical Medic Program
- Law Enforcement Medical Training
  - Litters
  - EMT training

**MASS CASUALTY INCIDENT RESPONSE**
DECEMBER 2, 2015

**EMS ON SCENE**

BREAKING: Several Killed and 20 Wounded in Ongoing Hostage Situation in San Bernardino, California
LLUH WATERMAN TERRORIST INCIDENT TIMELINE

1110 Emergency Department receives notification via EMS that a mass casualty shooting has taken place in San Bernardino with 20 or greater potential victims expected.

1111 Executive Director of Emergency and Trauma services Connie Cunningham and Directors of Patient Care Emergency Department Shannon Camrict and James Parnell notified.

1112 Admin On-Call notified. ED begins setup of triage area, security perimeter, and trauma bays in preparation to receive patients. On-Call Trauma Teams and ED staff notified to report to ED.

1117 ReddiNet message confirms notification, “Mass Shooting. This is not a drill”


1131 Condition Alert declared for mass casualty by Connie Cunningham (Emergency & Trauma Department) and Georgann Smith (Environmental Health and Safety).

1138 Emergency notification sent using Send Word Now to LLU leadership.

1144 Security Officers secured perimeter around LLUMC and ED later supported by law enforcement. Triage set up complete.

1145 Law Enforcement arrives at Hospital to be liaison

1148 Patient #2 Arrives

1151 Patient #3 Arrives

1155 Patient #4 Arrives

1200 Incident Command Center established in LLUMC A-208

1203 Command Center notified by law enforcement that suspects were at large

1204 Send Word Now notification sent to “911 ALL” with location of incident and instruction to shelter in place if nearby.

1205 ED waiting for additional patients and updates

1415 911 Dispatch alerts Loma Linda of a bomb threat called in to them.

1530 PT #5 ARRIVES

1603 Code yellow cleared

ED RESPONSE

Mass casualty triage set-up is completed within 18 minutes of activation

INTERNAL COLLABORATION:
- Emergency Department
- Environmental Health and Safety
- Trauma Teams
- Facilities Management
- Campus Engineering
- Housekeeping
- Parking and Traffic
- CNS
- Security

EXTERNAL COLLABORATION:
- Local Police Department
- Local Sheriff’s Department
- LEMS/ICEMA and REMS
- Local Fire Departments
- Local Ambulance Services
- Central Supply Companies

17:48 CONDITION CLEARED??

- We waited to receive more patients. But by the evening, we had treated only five from the shooting.
- For hospital staff, reuniting patients with their families often felt like the most pressing task that continued into the evening and next day.
- ReddiNet was key in locating patients receiving treatment

LAW ENFORCEMENT & FIRE RESPONSE AND SUPPORT

Where do you need us and what can we do to help??

- 40 + Law Enforcement and Fire personnel respond from 12 agencies
- San Bernardino Sheriff’s Department reports BOLO two suspects at large in a black SUV. Possible third suspect driving

SIDE NOISE

- SBSO receives reports of an active shooter on Loma Linda campus – unfounded
- SBSO receives a bomb threat for LLUMC
  - SWN alert is sent out to “911 ALL” CODE YELLOW
  - Security and SBSO conduct a floor by floor search – unfounded
- Law enforcement remains on site for the next 30 hours.
Be Prepared

- Know Emergency Codes
- Disaster Drills
  - Take them seriously and do it often
  - We drill quarterly with ED staff
- Annually with ED staff & EMS & Local LEMSA
- Disaster supplies
  - Have disaster supplies on hand and readily available
  - Use your disaster supplies in your drills so that you are familiar with it.
- FEMA training
  - FEMA provides training for disaster at all levels for all roles from police
  officers to fireman to ED and bedside nurses
  - It's free and it's very good training

Don't Forget to take care of each other!

COMMUNITY SUPPORT

- We received support from local and national entities in the days following the event. Some of these are:
  - Costco
  - Firehouse Subs in Loma Linda
  - Angelo's Italian Restaurant
  - Coachella Pizza
  - Med 1 vents
  - Double Tree Hotel
  - Rialto Middle School student body
  - Loma Linda Academy student body
  - ENA sent flowers
  - A nurse from Austin Texas sent pizza.
  - The ED at Beth Israel Deaconess Medical Center
  - The Medical Center of Aurora in Colorado
Thank You!!!

Epidemiology

Firearms accounts for:

- 30,000 deaths/year
- 88 deaths/day
- 160 none fatal injuries/day
- 3,000 deaths - age < 15 years

- Leading cause of death among US black males
- Previous convictions – 9 x likely to be involved in gun violence
- Prevalence of violence in severe mental illness 12% per year
- 75% firearm related injuries - uninsured

www.thecrimereport.org

Association of Violent Crimes/State & Gun Ownership

PUBLIC MASS SHOOTING

- No broadly accepted definitions
- 4 or more people killed – (US Congressional research service)
- 372 mass shootings in 2015
- 475 Deaths
- 1870 Wounded

www.shootingtracker.com
TIMELINE OF EVENTS

- 11:00 am – shooting began
- 11:15 am – Mass casualty alert
- 11:28 am – First Trauma Activation
- 11:44 am – First patient arrived
- 11:55 am – The fourth (total five) patient arrived

FAVORABLE FACTORS

- Time of day
- Time of the week
- Proximity to scene
- Additional Medical facilities nearby
- 26 EM Residents in a nearby class room

PERSONNEL (First 15 Minutes)

- 5 Emergency Medicine Attendings
- 20 Emergency Medicine Residents
- 8 Emergency Department Nurses
- 7 Acute Care/Trauma Attendings
- 5 General Surgery Chief Residents
- Anesthesia, SICU and other ancillary staff
RESOURCES

- Mass Casualty Triage area (In front of ED)
- 12 Total trauma beds
- 5 Available operating room
- 4 Surgical ICU Beds
- 40 Units of O negative blood
- Calls from multiple hospitals pledging support

CASE 1

- Female in her 50’s
- Multiple GSW to torso
- Normal BP in route
- Hypotensive in ED
- Possible no lung sliding on E-FAST
- Transfusion initiated

Injuries and Interventions

- Laparotomy
- Pelvic and Perineal wounds with active bleeding
- Packing
- Exploration of Left Chest wall hematoma
- Proximal brachial artery and venous injury

CASE 2

- Male in his 30’s
- GSW’s to torso
- Hypotensive in the ED
- Left needle thoracostomy
- Transfusions initiated
- E-FAST equivocal/neg
Injuries and Interventions

- Non-therapeutic Laparotomy
- Left Tube Thoracostomy (in ED)
- Left Thoracotomy with extension to Right
- Pulmonary vein injury (repaired)
- Temporary vac closure

Outcomes

- Mortality 0% (6 months follow up)
- Multiple operations (4/5 patients)
- ICU LOS (range) 5 – 48 days
- Hospital LOS (range) 1 – 56 days
- Complication - one patient accounted for all of the complications.

‘The profile of wounding in Civilian public mass shooting fatalities’

- Retrospective review of autopsy reports
- 139 fatalities (371 wounds) – 12 Mass shooting events
- Dataset represents 15% of Mass shootings (1983 – 2013)

RESULTS:

- 58% with GSW to the head and chest
- 20% extremity wounds
- 13.5% lower abdomen
- Probable site of fatal wounding (Head or chest 77% of cases)
- No deaths due to exsanguination from extremity wounds

Sarani et al Journal of Trauma June 2016 Pub ahead of print

 OPPORTUNITIES FOR IMPROVEMENT

- COMMUNICATION
  - Centralized and reliable source with a clear chain of command
  - Establish secure back-up communication systems
  - Mandatory periodic testing of the communication systems
  - Limit hospital communication outlets/inlet

- SECURITY/ STAFF PERSONAL PROTECTION
  - Proper identification of personal (Vest, oversized badges)
  - Proper screening of responders and patients
  - Police presence (deterrence to criminal activity/violence)
  - Safe transportation/escort of personal (in/out)
PATIENT FLOW
- Smaller unit 'strike teams' with clear rest
- Crowd control
- Designated area for family and reserve staff
- Bypass of usual hospital protocols

QUESTIONS
EDSW’s Role

Typical Level A Trauma : Non-fatality
- Notification
- Preparation
- Consultation
- Family/Next-of-Kin
- Therapeutic Support
- Handoff

December 2, 2015
- Notification
- Preparation
- Consultation
- Family/Next-of-Kin
- Therapeutic Support
- Handoff
- Atypical

Takeaway
- Communication
- Expectations
- Training
- Flexibility

END