

## Creation of a Beachtown Triage Centre in the Midst of a Disaster

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That morning I was considering cycling to work, a 15Km journey from my home in Sumner to Christchurch Public Hospital. I was due to start my shift in the Emergency Department at 3pm but decided to go in a little earlier to do some paperwork. I stood at the window staring at the grey skies, debating whether I should cycle or not. Now looking back, I'm grateful for those moments of deliberation. Had I jumped on my bike and sped off, I would have been level with the cliff edges which tumbled down onto the road when the earthquake struck at 12:51.

Halfway down the street. I heard the low rumbling and then a thunderous crash as the rocks and boulders broke from the hillside and smashed down into the horse paddock below. I struggled to remain standing as the ground shook violently and cracks opened up around me. The front of a newly built house broke in two and I jumped backwards to avoid a brick wall which shattered over the pavement. In a few seconds calm again, followed quickly by panic as neighbours ran from their houses in distress. I had been in Christchurch for the last big earthquake in September but something about this tremor felt more sinister, even though I had no idea, of the devastation far away in the city centre.

My instinct was to try and get to the hospital but with the threat of a tsunami, a road block was already in place at the bottom of the hill. I could drive no further than the end of my road. I waited in the car while the aftershocks rocked the car from side to side, trying in vain to call friends and colleagues via jammed networks. Finally the road block was lifted and I drove down into the town of Sumner.

As I pulled into the town I saw the Volunteer Fire Service truck parked next to the remains of Retired Servicemen's Association building, which was now a pile of rubble, crushed by the fallen cliff. The Firemen were talking to two of my friends, both anaesthetists from the hospital, concerned that several men from the construction site next to the RSA building were trapped beneath the rubble. Some had managed to escape as the rocks tumbled down onto the building and in the half hour I'd been stuck on the hillside my friends had been hard at work treating their injuries. They had already splinted an open tib-fib fracture and made a makeshift spinal board for a man with a suspected thoracic spinal cord injury. Somebody arrived with a syringe full of morphine for the two men, donated by the local GP Surgery.

Reports were coming through over the fire truck radio that access into the city from Sumner was cut off and we would not be able to get the sick and injured to hospital. The only alternative was to set up a treatment centre in Sumner and deal with the casualties as best as we could, until more help arrived. It was decided that rather than deplete the GP's supplies and take them to another location, we should set-up the triage centre at the GP Surgery where several of the doctors living in Sumner had gathered. Apart from the mess and lack of power and water the Surgery was largely unscathed.

In every chaotic situation there has to be a leader, someone prepared to co-ordinate the different roles within a workforce. The GP took on that responsibility and I cannot praise him enough for his quick thinking, help and support that he gave to the junior doctors that day. He organised teams of doctors to go to different streets and check on schools, rest homes and other residents and pass the word around that help was available if needed. The rest of us stayed back

at the Practice and tidied up the mess in the consulting rooms, ready to receive injured patients. We had limited supplies of medicines and suture materials and we knew we would have to conserve what we had.

The first consultation room was to be used to treat the more seriously injured people. A team of senior doctors with ITU and Anaesthetic experience gathered to take care of the man with suspected spinal injuries. He was given oxygen, IV fluids and analgesia and stabilised ready to be airlifted to hospital when we could get a helicopter to Sumner.

An elderly gentleman with a scalp and hand laceration came into the second consultation room. I started to clean the wounds with saline and put pressure over the large haematoma developing on his hand. The GP was extremely proficient in minor operations and he sutured both wounds whilst I placed steri strips over more superficial cuts and grazes. A young girl came in with a dog bite to her hand. The wound was cleaned, bandaged and she was sent home with the best selection of oral antibiotics we could find. Another lady came in with a scalp laceration which I felt needed stitching but I was having difficulty removing her hair from the wound. Another GP arrived shortly afterwards and taught me how to tie a hair braid suture which brought the edges of the wound together perfectly without the need for suture material. In the midst of this chaotic situation, I was extremely grateful to have acquired a new skill! The patient also mentioned that her back was painful, especially when moving her right arm. Examination of her back revealed a large swelling over her right scapula, painful to palpate. I was unsure as to the cause of the swelling but hazarded a guess that she might have torn her Trapezius muscle. Perhaps this would require surgical repair but the patient accepted that for now all non-emergencies would have to stay at home. I gave her some simple analgesia and knew this was all I could do for her at present.

A lady arrived with a handful of medical supplies from the local pharmacy in Redcliff's. She and her husband ran the pharmacy which was now in complete disarray but she thought she might be able to go back and recover more supplies if needed. The GP quickly made a list of stocks that were running low- antibiotics, simple analgesia, saline, dressings, syringes etc. and myself and the pharmacist set off in the car. Unfortunately the keys for the pharmacy were with her husband who was with the Fire Service trying to rescue somebody trapped in a house way up on the Cliffside. We had no choice but to follow the path of the fire truck up the cliff road, driving around boulders and rock fall, not knowing what lay ahead of each corner.

With the keys in hand we opened the pharmacy. Everything that

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had been stacked neatly on shelves was now on the floor, bottles were smashed and the Pharmacist had to clamber over fallen cabinets to reach the supplies. Violent aftershocks shook the pharmacy and fearing the building might collapse we took what we could and headed back to the GP Surgery. More injured people had appeared at Surgery door by then. Some food and drink arrived for us, I'm not sure where from. There were so many donations and random acts of kindness that day.

I received a sms from the hospital asking if I would be able to report for my shift in the Emergency Department. We seemed to have enough help at the Surgery that myself and a few other doctors could attempt to get to the hospital. The Fire Service informed me of an alternative route from Sumner to the hospital. I made my way to the city. The 25 minute journey to the hospital took over an hour and every entry point into the city was cordoned off.

The Emergency Department was a hub of activity like I'd never seen. There were hundreds of doctors and nurses from different specialities who had come to help. One of the Emergency Consultants stood at the tannoy and directed people to different cubicles as trauma after trauma came through the door. She formed teams of doctors and nurses on standby to receive patients, directed fast scans and x-rays to different cubicles and co-ordinated the entire emergency department. She worked tirelessly and her efforts that day will have saved so many lives.

The injuries I saw were mainly broken bones and crush injuries. Patients who had been trapped for some time were at significant risk of developing rhabdomyolysis and special IV kits were made to combat hyperkalaemia and hypoglycaemia.

I sutured an eyelid laceration of a gentleman who had managed to escape from a large office block which had completely collapsed in the earthquake. I apologised for the discomfort caused by injecting his eyelid with local anaesthetic. He told me not to worry- he said that all

he could think about was that out of his team of colleagues at work, he had been the only person to have made it out the building alive. His words will stay with me forever.

The next day after a restless night's sleep I came to work knowing that the patients pulled from the rubble would be that much sicker 1 day on from the tragedy. But sadly we saw very few survivors that day.

I saw a number of patients with Neck of Femur fractures sustained during the earthquake, but had been kept at home for a day or two, cared for by family members and nursing home staff. I also saw patients who had been treated initially by volunteers at the many triage centres set up across the city, like our Surgery in Sumner. Their work was so important during this time, preventing the hospital from becoming overwhelmed and allowing the Emergency Physicians to deal with the more life-threatening injuries on the day of the disaster.

At the time of writing, the number of people killed in the earthquake stands at 159 though many more are still missing. It is one of New Zealand's worst tragedies. My heart goes out to all those families in mourning.

Many homes are still without power and water and access to various parts of Christchurch is restricted. But spirits remain high as people help one another, sharing food and water, shovelling liquefaction from driveways and helping to clear up local supermarkets and libraries. Some people with homestays and farms on the outskirts of Christchurch have opened their doors to anyone who needs a place to stay, giving their address and cellphone numbers out over the radio.

I have been amazed at the kindness of the people of Christchurch and have witnessed firsthand the triumph of the human spirit in times of tragedy. Some of the many British Doctors working in Christchurch may pack up and leave now this has happened. In all honesty I have not considered it. I love working in the Emergency Department, the friends I've made and the spirit of the people, and these things still remain.