Hospital Emergency Medical Incident Command in Taiwan.

邱文達
Chiu WT;Tsai SH

Abstract

This article discusses Taiwan's experience in managing surge needs based on recent events, including the 1999 earthquake, severe acute respiratory syndrome in 2003, airliner crashes in 1998 and 2001, and yearly typhoons and floods. Management techniques are compared and contrasted with U.S. approaches. The authors discuss Taiwan's practices of sending doctors to the scene of an event and immediately recalling off-duty hospital personnel, managing volunteers, designating specialty hospitals, and use of incident management systems. The key differences in bioevents, including the mathematical myths regarding individual versus population care, division of stockpiles, the Maginot line, and multi-jurisdictional responses, are highlighted. Several recent initiatives aimed at mitigating biothreats have begun in Taiwan, but their efficacy has not yet been tested. These include the integration of the emergency medical services and health-facility medical systems with other response systems; the use of the hospital emergency incident command system; crisis risk-communications approaches; and the use of practical, hands-on training programs. Other countries may gain valuable insights for mitigating and managing biothreats by studying Taiwan's experiences in augmenting surge capacity.