

DMAT First Response Activities

Satoru Kaihatsu
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DMAT: Disaster Medical Assistance Team

(English Translation by Red Cross Nuclear Disaster Resource Center)

~~~ I really realize how valuable the relationships between people are. ~~~

We departed as a DMAT on the day the earthquake occurred and performed the duty of transporting patients at Minamisoma. Later on we started relief activities in Shinchi, but had to withdraw due to the nuclear accident. I realized that although the abilities of a human being are so small compared with the scale of a huge disaster, we could still achieve positive results by cooperating with each other.

On March 11<sup>th</sup>, I felt a strong earthquake at our hospital ward. While I was checking for possible damage around the ward, a news report coming from a patient's TV was saying that the Great East Japan Earthquake and Tsunami had occurred. The news made me think of the possibility of a DMAT being sent to the affected area, and the necessity of getting ready immediately. Shortly I received a phone call at the ward asking me if I would be available because a decision had been made to dispatch a DMAT.

I had been trained and learned in case of disasters and that I should be ready to go at any time. But when I was actually called for DMAT activities, various concerns came through my mind. However, there was no time to hesitate. I responded, "Yes, I am available."

After asking my ward colleagues to take over my duties, I contacted my wife telling her about the dispatch. Then, we prepared the necessary equipment and left the hospital in an ambulance and a station wagon. Since safety of the expressway toward the affected area was not confirmed yet, we were stuck at the Tsugawa Interchange for a while. When I saw dozens of emergency vehicles such as fire engines and relief team cars coming from Niigata Prefecture, I realized again that a huge disaster had happened. But at the same time, I was encouraged at seeing some paramedics that I knew and DMAT members from other hospitals.

In the City of Fukushima, we saw no visible damage to buildings, but the roads were heavily congested. We drove through the congestion with the red light flashing and the siren wailing. It was late at night when we finally arrived at Fukushima Medical University Hospital which was assigned as the meeting point.

At the DMAT headquarters, other teams that had arrived there before us were already contacting other hospitals in the area to see if they had sustained any damages. While helping those teams, I was watching on TV the damages caused by the tsunami and also the blazing fires spreading in Kesenuma. It was like watching the fires of hell; I felt terribly scared.

Our first activity was to transport a patient from Minamisoma City Hospital to Fukushima Medical University Hospital. We drove to Minamisoma City Hospital through a completely dark road due to power failure. Arriving at the hospital, we carried a patient who had received injuries throughout her body caused by the tsunami into the ambulance. We asked the family to get in the ambulance to accompany us but they said, "We can't go because we have to search for family members who are still missing." They had painful looks on their faces. The patient had her eyes closed and said very little during the transport. I was frequently talking to the patient, "Are you feeling cold? Are you hurt?" and repeatedly measured her vital signs.

Considering the patient's feeling, I had no idea of what else I could say. All the way to

Fukushima Medical University Hospital I was touching her shoulder or hand that was much less wounded than other parts of her body: hoping to make the patient feel as safe as possible. It was after 2:00 in the morning when we accomplished the transportation to the hospital safely. But strangely enough, although I did not feel tired at all, we took a nap in the ambulance waiting for the next assignment. The dawn's light woke me up next morning.

On the morning of March 12<sup>th</sup>, we were on standby, waiting for our next assignment. During this time I became impatient and that just made it feel like the waiting time was longer than it actually was. We then changed our function from being a DMAT to a Red Cross relief team and headed to Shinchi located along the coast of Fukushima Prefecture.

Approaching the coast, we saw what the tsunami had done to the town. After setting up a first aid center in the town hall, we conducted mobile clinic activities at the evacuation centers. There were many elderly people and many of them complained that they had lost medications or were suffering from lack of sleep, which was causing their blood pressure to rise. When we returned to the town hall after the activities, the mayor came to our doctor with a grim look saying that there was something he had to talk to our leader about. He said, "The nuclear power plant is likely to explode." Shinchi is located about 50km away to the north from the plant. The scale of the explosion and the damages as reported by the media were eventually not dangerous enough to cause any deaths. However, I was frightened at that time while standing by our leader and listening to the mayor, and thought, "How far is this town from the nuclear power plant? What would happen to me if the plant exploded? Was I going to die? I felt sorry for my family if I died here." My mind went blank and I felt my blood run cold. It was decided that we would leave town after visiting another mobile clinic at another evacuation center.

The withdrawal made me feel sad and regretful as I recalled the faces of the people I saw that day, and the conversations I had with them. In the car leaving the evacuation center, I could not look at the faces of the affected people who were passing by the car because I was feeling guilty for leaving and thinking of the people that were left there. We drove toward the north as if getting away from the nuclear power plant and arrived at the city hall of Shiroishi in Miyagi after 20:00.

At the city hall, we were kindly provided with a cup of noodles and rice balls. Eating the first hot meal in many hours relieved me. Only at that time, did I realize that we had eaten nothing on that day. We slept deeply in our car until the next morning.

On March 13<sup>th</sup>, we helped to set up a domestic Emergency Response Unit (dERU) on the premises of the city hall. After that, our return to Niigata was decided. We left the city hall at noon to return to our hospital.

During the three days that we performed first response activities, many people supported us, and I realized the importance of human relationships. Although the abilities of a human being are small compared with the scale of a huge disaster, we can achieve positive results by cooperating with each other. I hope this kind of awful disaster does not occur again, but such a disaster might happen again while I am working as a nurse.

Based on my experiences, there are things that I should do on a daily basis to better prepare for possible disasters in the future. I should build and maintain good relationships with other people in my area, confirm how disaster relief personnel should cooperate with each other during a disaster, and increase my knowledge and enhance my communications skills so that I can better conduct disaster relief activities based on the understanding that other disaster relief personnel have.

Finally, I would like to express my gratitude to my hospital colleagues who were dispatched to the affected area with me; all the people who worked with us during the relief activities there; the staff members of our hospital who supported our activities or took over my duties at the ward, and to my family who was worried about me. I am really grateful for the support from all

of you. Thank you.