D1.5: Mass Casualty Care in an Expeditionary Environment: Developing Local Knowledge and Expertise in Context

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Abstract:

Introduction: Military nurses who deploy to combat settings face new opportunities and challenges as they care for casualties with complex and devastating traumatic injuries. The purpose of this study was to document personal accounts of experiential learning concerning medical and nursing care rendered during mass casualty events, in order to describe, evaluate, extend, and disseminate new knowledge for further development.

Method(s): A qualitative ethnographic approach guided this research, which elicited first person near accounts of 107 military nurses’ experiential learning during deployment to the Middle East. Nurses were recruited from four military medical centers. During group or individual interviews, nurses described situations in which they learned something new, where things went well or poorly for a casualty, and any circumstances where breakdown or error occurred. The interviews were audiotaped and transcribed verbatim. Data were organized using ATLAS.ti. Using an inductive thematic analysis strategy, the researchers carefully read and coded the transcripts and clustered codes in themes.

Results: Eight themes regarding experiential knowledge were identified in a trauma system that featured swift transport, early trauma and surgical care, and rapid aeromedical evacuation: 1) organizing for mass casualty operations, 2) dealing with uncertainty about incoming casualties, 3) developing systems to track patients, 4) resource utilization, 5) ripple effects of a mass casualty event, 6) enlarging the scope of nursing practice, 7) operating medical facilities under attack, and 8) nurse emotions related to the mass casualty experience. In addition, 12 principles of managing mass casualty events were distilled from the experiential learning of the nurses.

Discussion & Conclusions: Evidence from this study indicates that leaders and clinicians who use the 12 principles as they plan for, execute care, and reflect on care provided during a mass casualty event can initiate self-improving practices and provide efficient and local expert care. The knowledge generated from this study is applicable in civilian settings where a natural disaster, industrial accident, transportation accident, or terrorist attack may produce a mass casualty situation.

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