

# NATIONAL EXERCISE PROGRAM

## Master Scenario Events List (MSEL) Package

*Presented By:*



Publishing Date:

*For Official Use Only*

**EBOLA PATIENT**

**11/07/2024**

## Preface

The purpose of publishing the Master Scenario Events List (MSEL) Package is to provide exercise control team members a complete edition of the MSEL. This document is not intended to be distributed to exercise players but rather they should receive those portions for which they are responsible as handouts. This would include the summary listing as well as any detailed inject forms that they will receive. Control team members may use this document to track exercise play and maintain situational awareness. Evaluators may also reference individual pieces of the document through teamwork with the controllers.

Exercises are the culmination of training toward a higher level of preparedness. This document was produced with the help, advice, and assistance of the Avera Queen of Peace (AQOP) Hospital Planning Team. As such, this document is tangible evidence of hospital and regional/community partnership in response to a healthcare facility evacuation.

The information in this document is current as of the date of publication and is subject to change as dictated by the Exercise Planning Team.

### **IMPORTANT!**

This MSEL Package is complementary to the Exercise Plan (EXPLAN). Refer to the EXPLAN for more extensive information about the exercise, including participating agencies, schedules, briefings, and the responsibilities of various participants.

This Handout contains information about the events of the exercise and should be safeguarded from disclosure before and during the exercise. Only designated controllers should have access to this handout.

**Administrative Handling Instructions**

1. The title of this document is *Ebola Patient Exercise Master Scenario Events List Package*.
2. This document should be safeguarded, handled, transmitted, and stored in accordance with appropriate security directives. It should be released to individuals on a strict need-to-know basis. Information contained herein was prepared for the exclusive use of planning team members, project officers, and non-participant personnel involved in the operational and administrative aspects of the exercise. The contents of this handbook will not be divulged to exercise participants unless officially authorized by Avera Queen of Peace Hospital.
3. For more information, please consult the following exercise points of contact (POCs):

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## Part 1: Exercise Objectives & Scenario

### Emerging Infectious Disease Drill Overarching Objectives:

1. Recognition of the event. Staff quickly recognized that the Patient answered “YES” to questions regarding travel outside the U.S.
2. Staff Response. Hospital staff was able to quickly place the Patients in Isolation.
3. Knowledge of roles. Staff was aware of their individual role during the Incident specific to their location and/or Department.
4. Use of correct PPE. Staff was able to properly Don and Doff appropriate PPE.
5. Onsite Incident Management. The Incident Command Team (ICT) will be evaluated on their ability to: assess a situation requiring specific response and integrate the overall process of evacuation into the Hospital Incident Command System (HICS).
6. Notifications. Staff and ICT were able to make notification to the South Dakota Dept. of Health (SDDOH) regarding a potential Ebola patient as well as Avera Brady and Mitchell Fire EMS.

### Scenario

An AQOP Advance Practice Provider (APP) has been providing care to patients in the Democratic Republic of the Congo (DRC) in eastern Africa for nearly 3 weeks. The APP is unaware that there is another Ebola outbreak beginning in this area. The APP returns to the USA and then back to Mitchell. The APP goes to Avera Brady LTCC to visit a family member. While visiting, the APP is sweating but attributes this to the warm temps. After visiting their family member, the APP hugs their family member and gives them a kiss on the cheek. Two days later, the LTCC resident begins to complain of weakness, nausea, vomiting and chills. Staff at the LTCC evaluate the resident and dial 911 to request EMS transport the patient to AQOP E.D. Once the resident arrives at AQOP, they are being evaluated by AQOP E.D. staff and the APP arrives at the E.D. desk to inquire about their family member and is also complaining of weakness, chills, nausea, and vomiting. The travel question reveals that the APP recently returned from the DRC. AQOP Infection Control had recently sent a briefing from the CDC related to another Ebola outbreak in the DRC. This prompts E.D. staff to isolate both patients, implement appropriate PPE, and make required notifications\*\* (\*\*If any phone calls are made,

assure that the call begins and ends with: “This is an exercise, this is an exercise”). Once notifications are made, arrangements are being made to transport both patients to the South Dakota assessment hospital in Sioux Falls at Sanford USD Medical Center.

**Part 2: Master Scenario Events List (Summary)**

<b>MASTER SCENARIO EVENTS LIST (Summary)</b>						
<b>Event #</b>	<b>Inject</b>	<b>Event Time (Approximate)</b>	<b>Event Description</b>	<b>Responsible Controller</b>	<b>Recipient Player(s)</b>	<b>Expected Outcome of Player Action</b>
1			<b>STARTEX</b>	Controller	All	
2	Exposure	Day 1 15:00	The patient visits family member at Avera Brady LTCC.	Controller	Patient, Residences, LTCC staff	Expose residences & LTCC staff.
3	Complaints	Day 3 09:00	The patient begins to complain of weakness, nausea, vomiting and chills.	Controller	Patient, Residences, LTCC Staff	LTCC Staff react appropriately to patients' complaints.
4	Evaluation	Day 3 09:05	LTCC Staff evaluate the patient and dial 911 to request EMS transport the patient to AQOP E.D.	Controller	Patient, Residences, LTCC Staff, EMS, AQOP E.D.	Staff react to complaints and call 911.
5	Evaluation	Day 3 09:10	EMS arrives with questions and evaluates the patient. Based on symptoms, EMS asked the patient if traveled outside the country.	Controller	EMS, Patient	EMS put on PPE and gave patient a mask.
5	Transport	Day 3 09:35	EMS called AQOP emergency staff they were transporting a patient who had traveled outside of the country. Possible Ebola exposure.	Controller	Patient, EMS, AQOP emergency staff	AQOP put on PPE and met EMS to retrieve the patient.
6	Questioned	Day 3 09:45	AQOP emergency staff evaluated and questioned the patient.	Controller	Patient, AQOP emergency staff	The patient was placed in a quarantine room.

<b>MASTER SCENARIO EVENTS LIST (Summary)</b>						
<b>Event #</b>	<b>Inject</b>	<b>Event Time (Approximate)</b>	<b>Event Description</b>	<b>Responsible Controller</b>	<b>Recipient Player(s)</b>	<b>Expected Outcome of Player Action</b>
8	Isolation	Day 3 09:52	Placed in isolation (negative air room in the E.D.)	Controller	Triage	Patient is moved into isolation.
9	Report	Day 3 09:55	Deputy EM called the duty officer to report Ebola exposure.	Controller	EM	The duty officer reported it to the Department of Health.
10	Report	09:56	AQOP staff called the Department of Health to report Ebola exposure.	Controller	AQOP staff	Dept. of Health would review their policy and act accordingly.
11	Transport	Day 3 09:55	Arrangements made to transport the patient to the South Dakota assessment hospital in Sioux Falls at Sanford USD Medical Center.	Controller	Triage, Administration	Patient is transported to Sioux Falls, Hospital is scrubbed.
12	participating	Day 3 10:00	All staff participating in the event will review policy manuals.	Controller	All Involved	All staff participating in the event will review policy manuals, taking note of any updates needed.
13	ENDEX	12:00	<b>ENDEX</b>	Controller	All	End the Functional Exercise



**Part 3: Master Scenario Events List (Expanded)**

Event #		Event Time:		
<b>Via:</b>	Verbal Inject	<b>Objective(s):</b>		
<b>Who Delivers?</b>	Controller	<b>Recipient Player(s):</b>		
<b>Event Description:</b>				
<b>Inject:</b>				

<b>Expected Action(s):</b>	<b>Notes</b>
<b>Expected Outcome:</b>	<b>Notes</b>

**Avera Queen of Peace Hospital**

**Master Scenario Events List**

**Ebola Patient Exercise**

<b>Event #</b>		<b>Event Time:</b>		
<b>Via:</b>	Verbal Inject	<b>Objective(s):</b>		
<b>Who Delivers?</b>	Controller		<b>Recipient Player(s):</b>	
<b>Event Description:</b>				
<b>Inject:</b>				

<b>Expected Action(s):</b>	<b>Notes</b>
<b>Expected Outcome:</b>	<b>Notes</b>

**Avera Queen of Peace Hospital**

**Master Scenario Events List**

**Ebola Patient Exercise**

<b>Event #</b>		<b>Event Time:</b>		
<b>Via:</b>	Inject	<b>Objective(s):</b>		
<b>Who Delivers?</b>	Controller	<b>Recipient Player(s):</b>		
<b>Event Description:</b>				
<b>Inject:</b>				

<b>Expected Action(s):</b>	<b>Notes</b>
<b>Expected Outcome:</b>	<b>Notes</b>

**Avera Queen of Peace Hospital**

**Master Scenario Events List**

**Ebola Patient Exercise**

<b>Event #</b>		<b>Event Time:</b>		
<b>Via:</b>	Verbal Inject	<b>Objective(s):</b>		
<b>Who Delivers?</b>		<b>Recipient Player(s):</b>		
<b>Event Description:</b>				
<b>Inject:</b>				

<b>Expected Action(s):</b>	<b>Notes</b>
<b>Expected Outcome:</b>	<b>Notes</b>