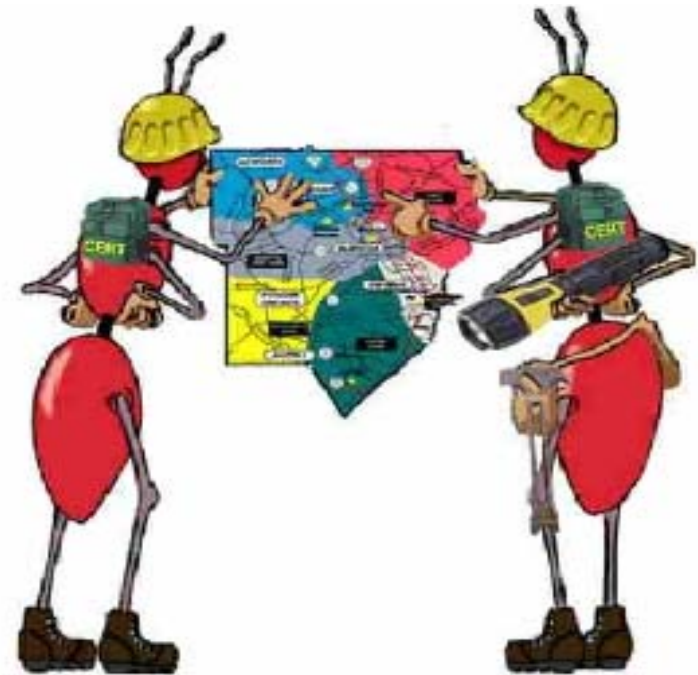


Emergency Communication

- Cobb EMA..... (770) 499-4567
- CERT EOC Number.....(770) 499-4560
Note: Once the EOC is activated, CERT members and Neighborhood CERT leaders use this number for status reporting.
- All Fire & Police.....911
- Non-emergency 911.....(770) 499-3911
- Non-emergency Fire
 - Austell.....(770) 944-4322
 - Cobb County.....(770) 528-8000
 - Marietta.....(770) 794-5450
 - Smyrna.....(770) 434-6667
- Non-emergency Law Enforcement
 - Acworth.....(770) 974-1232
 - Austell.....(770) 944-4331
 - Cobb County Police.....(770) 499-3900
 - Cobb County Sheriff.....(770) 499-4200
 - Kennesaw.....(770) 422-2505
 - Marietta.....(770) 794-5300
 - Powder Springs.....(770) 943-1616
 - Smyrna.....(770) 434-9481
- Cobb Animal Control.....(770) 590-5611
- Cobb DOT.....(770) 528-1600
- Cobb/Douglas Public Health.....(678) 784-1080
- Cobb Water Dept.....(770) 419-6201
- Red Cross (Local).....(770) 428-2696

COBB COMMUNITY EMERGENCY RESPONSE TEAM



BUZZ CARDS

911 PROTOCOL QUESTIONS

Purpose: *In a case where the CERT member is the first on the scene, he/she should be able to answer all questions quickly and correctly. Initial questions include, in this order:*

- A. What is the location (WHERE)?**
An exact address is the most desirable type of location to provide. If an exact address is not available, make every reasonable attempt to provide directions from a known address. If an address is not available, attempt to obtain the closest intersection.
- B. What is your name (WHO)?**
- C. What is your phone number?**
- D. What is the emergency (WHAT)?**
- E. When did the incident occur (WHEN)?**
- F. Any further Descriptors?**
In case of a disaster, a description of the event, in as much detail as available, and a brief summary of potential local or industrial hazards would be helpful in summoning the appropriate response.

Do not attempt to use code designations as the National Incident Management System requires plain language.

EOC COMMUNICATION

Purpose: *The format of the communication with the EOC should be concise and complete, structured as follows:*

- A. What is your Neighborhood CERT Name & Location?**
The representative at the CERT desk will have access to the boundaries covered by that Neighborhood CERT.
- B. What is your name, CERT #, & phone number?**
- C. What is the nature of the disaster?**
- D. What is the status of the neighborhood?**
“All Clear” if non-affected
“Activated; will update later”
Number of affected persons/property
At this point, do not provide *specifics* of victims; instead provide the triage categories and the numbers in each.
- E. Special Circumstances**
The responders need to be aware of critical information as they approach the neighborhood (e.g. downed live power wires, fires, etc.)

Do not attempt to use code designations as the National Incident Management System requires plain language.

FIRE

- A** = Common Combustibles
- B** = Flammable Liquids
- C** = Energized / Electrical
- D** = Combustible Metals

PASS

Pull the pin,
Aim at the base of the fire,
Squeeze the trigger hard,
Sweep from one side of the fire to the other slowly.

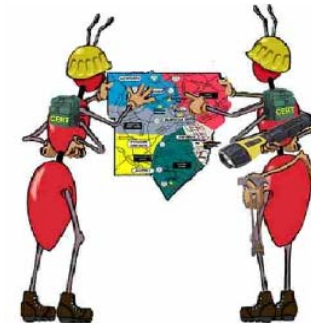


YOUR FAMILY & YOUR HOME COME FIRST

Make sure your family and home are taken care of. Shut off utilities if necessary (you smell gas, see or smell smoke, or see fire). Assess your home for structural damage. Turn off utilities if you are going to leave your home.

ASSIST YOUR NEIGHBORS, WORK WITH A BUDDY, SIZE-UP ALL SITUATIONS

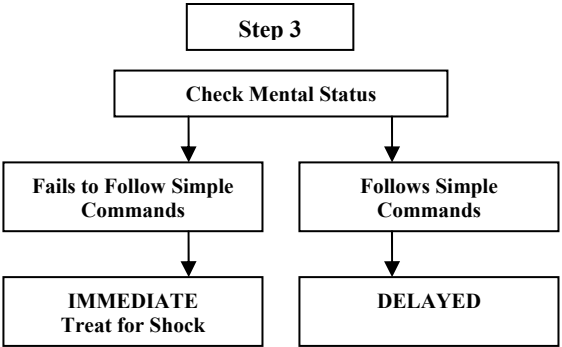
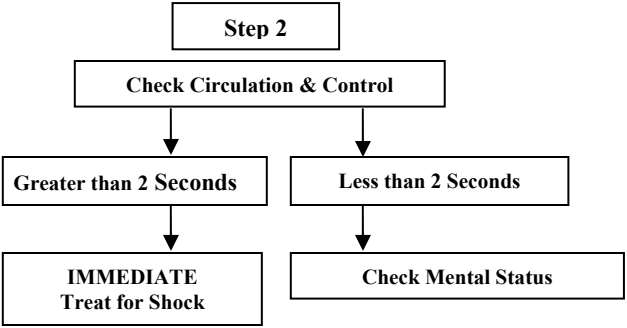
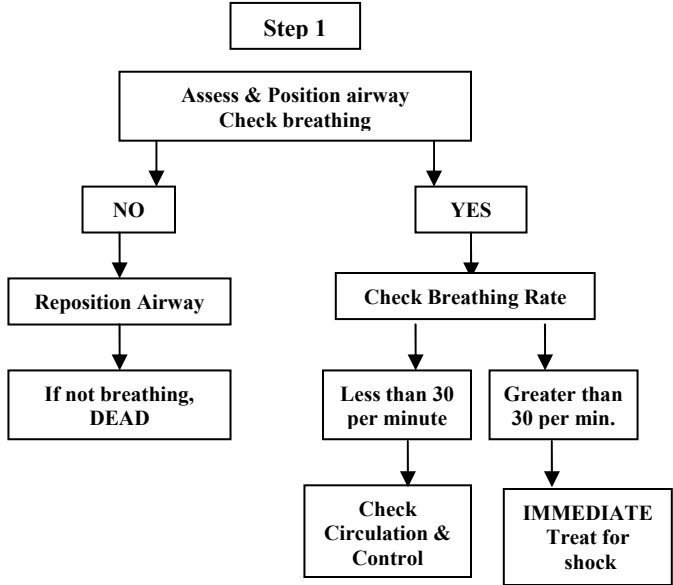
Is it too dangerous? If yes, walk (run) away. Report to the appropriate agency.



SEARCH & RESCUE

- ☹☹☹ Lightly Damaged – Search, Triage, & Treat victims where you find them. Evacuate victims to treatment areas as needed.
- ☹☹☹ Moderately Damaged – Search & Evacuate victims as you find them.
- ☹☹☹ Heavily Damaged – STAY OUT!

Triage Decision Flowchart



MEDICAL TRIAGE

Call out to the group; if able, they should move toward your voice. These people probably don't need immediate treatment and can be of assistance (GREEN). Next, proceed to people who haven't moved and begin Triage.

RESPIRATION

Look, listen, & feel. If not breathing, open the airway (Head tilt/chin lift). If still not breathing, repeat above. If still not breathing, mark/tag "Dead" (BLACK) and move on. If person is breathing, count the rate. If greater than 30 per minute, mark/tag "Immediate" (RED); if less than 30 per minute, now assess bleeding.

PERFUSION

Have the victim/bystander control severe bleeding (direct pressure, elevate, pressure point). Check victim's circulation using the "BLANCH TEST". Press the nail bed or any light skinned area. Keep level with the heart. If color comes back slowly (greater than 2 seconds), mark/tag "Immediate" (RED). If color comes back quickly (less than 2 seconds), go on to Mental Status OR Check Radial Pulse. NO = "Immediate" YES = go on to Mental Status

MENTAL STATUS

Have the victim follow simple commands. If victim is disoriented or unable to follow simple commands, mark "Immediate" (RED). If victim follows simple commands, is oriented, & has passed all tests, mark "Delayed" (YELLOW).

SHOCK

Treat all Immediate patients for shock: Lie flat, elevate legs, and maintain body temperature. Transport all patients as soon as possible - Immediate first. Do not move the DEAD unless absolutely necessary. Periodically reassess "Delayed" (YELLOW) victims.

Remember the CERT Program goal is to do the greatest good for the greatest number.

During triage, victims' conditions are evaluated, and the victims are prioritized and labeled (tagged) into three (3) categories:

Delayed (YELLOW): Injuries do not jeopardize the victim's life. The victim may require professional care, but treatment can be delayed.

Immediate (RED): The victim has life-threatening (airway, bleeding, or shock) injuries that demand immediate attention to save his/her life. Rapid, life-saving treatment is urgent.

Dead (BLACK): No Respiration after two (2) attempts to open airway. Because CPR is one-on-one care and is labor-intensive, CPR is not performed when there are many more victims than rescuers.