Title: Emergency evacuation in the event of fire

SOP No.: DCP/Ph1/009

**Date first effective:** 1<sup>st</sup> January 2024

Review date: 31st December 2024

Department of Clinical Pharmacology, 1st Floor, New MS Building, Seth GS Medical College & KEM Hospital, Parel, Mumbai 400012.

Category: Miscellaneous

Title: Protocol for emergency evacuation in the event of fire

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## 1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to outline the protocol for emergency evacuation in the event of fire in the Phase I unit and Archival Room of the Department of Clinical Pharmacology.

#### 2. Scope

This SOP is limited to the procedures for emergency evacuation in the event of fire in the Phase I unit and Archival Room of the, Department of Clinical Pharmacology, KEMH.

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#### 3. Responsibility

Head of the Department, Principal Investigator, Study Coordinator, any other appropriately qualified staff in the team or anyone available nearby at that time, will be responsible for immediate and emergency evacuation management in the event of fire.

- 4. Applicable rules and regulation (we can add MCGM fire brigade reference / state Govt reference if any or from their website as we comes under MCGM/ State Govt)
  - **4a)** Hospital fire prevention and evacuation guide, WHO/Pan American Health Organization (PAHO), 2018. <a href="https://www.paho.org">https://www.paho.org</a>
  - **4b**) Stellenbosch University, Public research university situated in Stellenbosch, Western Cape of South Africa. <a href="https://www.sun.ac.za">https://www.sun.ac.za</a>.
  - 4c) https://portal.mcgm.gov.in/irj/go/km/docs/documents/MCGM%20Depar tment%20List/Mumbai%20Fire%20Brigade/

# 6. <u>Detailed instructions (can be number as small a, b, c, d, etc. as it will be easy to identify the items as 6a, 6b, etc.)</u>

- 6a. Report any fire to the sister in charge, security officer of KEM and telephonically call to emergency number 101 or Wadala Fire Command Centre (022 24132058 immediately.
- 6b. Follow instructions from Fire Marshalls and Safety Officers/representatives in case of a fire.
- 6c. Switch off electrical supply at main switch outside lab door.
- 6d. Switch off gas supply at top on southern wall.
- 6e. Phone facilities management to switch off the air conditioning.
- 6f. Phone risk management for help.
- 6g. Use smother blanket in case of a small fire.
- 6h. Use water on all paper or wood fires. Water hoses are only used for big fires.
- 6i. Use CO<sub>2</sub> extinguishers on all other fires including electrical fires.
- 6j. Use dry chemical powder cylinders if other methods do not succeed. Use dry chemical powder if a liquid is burning.

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- 6k. If the fire is out of and a danger, do not attempt to put it out, evacuate the building immediately.
- 61. If the fire alarm rings after hours, contact the emergency and evacuate the building immediately.
- 6m. Place an "all clear" sign on the door as you leave to indicate that the room has been evacuated.
- 6n. **Do not use the lift** during an evacuation.
- 60. Do not use the central stairwell as an emergency exit, unless both emergency exits are inaccessible.
- 6p. Gather for a head count at the emergency gathering area which is on the grass outside the engineering building.
- 6q. Do not enter the building again until it has been declared safe to enter by the local fire Department.

### 7 Glossary (please number this too as a, b, c, d, etc.)

"Emergency move"—evacuate immediately or patients and staff may die; no time to prepare.

Evacuate as quickly and safely as possible; limited time to prepare (1 to 2 hours); follow procedures.

No immediate danger; sufficient time for systematic evacuation procedures (many hours to several days).

Do not move patients, but begin to prepare for evacuation.

The level of evacuation can be one of the following:

- 7a. Complete evacuation
- 7b. Partial evacuation

In most emergencies, a full evacuation will not be required. Due to the complex needs and unstable condition of many hospital patients, evacuation is generally considered as a last resort. Evacuation should be ordered only when absolutely necessary and when there is an imminent or potential unmitigated threat to patient/staff safety.

The following situations may warrant evacuation: (this is not numbered – please number this)

- 1. Fire, smoke, and/or toxic fumes
- 2. Structural damage to the facility
- 3. Exposure to hazardous materials
- 4. Terrorism or violent, armed visitors
- 5. Credible bomb threat

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