



Université Saint-Joseph de Beyrouth
جامعة القديس يوسف في بيروت

EMERGENCY EVACUATION PROCEDURE

**for the Campuses of Saint Joseph University
of Beirut (*Université Saint-Joseph de Beyrouth-USJ*)
to the Emergency Department of
*Hôtel-Dieu de France (HDF)***

1. STAKEHOLDERS

First Aid-Trained Personnel

- Call campus staff for help (emergency numbers to be dialed internally: CSH 5544, CSM 2266, CIS 6655, CFSS 4466, CST 3322, CLN 6695, CLS 6696, CZB 6697, ESIA-M 6698, Rectorate 1189) or, if necessary, contact emergency services directly.
- ☎ Lebanese Red Cross: 140
- Ensure their own safety first.
- Assess the patient's condition (level of consciousness, breathing, pulse).
- Provide first aid using the available equipment.

Campus Security Personnel

- Secure the area and identify hazards.
- Alert the evacuation coordinator if a serious hazard requires security support (law enforcement, Lebanese Army, etc.).
- Organize assembly points and facilitate site access to emergency services.

Evacuation Coordinator (Dean of the Faculty or Another Designated Person)

- Activate the emergency procedure and inform the Crisis Cell.
- Contact the HDF Emergency Department before the first transport leaves campus.
- ☎ HDF Emergency Department: 01 604 000 ext. 8500

METHANE method:

M – *Major Incident*: what happened

E – *Exact Location*: the precise location

T – *Type*: the nature of the event

H – *Hazards*: any ongoing hazards

A – *Access*: how the site can be accessed

N – *Number*: the estimated number of victims (AE = Absolute Emergencies / RE = Relative Emergencies)

E – *Equipment*: specific needs

2. INDIVIDUAL MEDICAL EMERGENCY

Raising the Alert

- immediately alert campus security or the administration and mobilize the following resources to attend to the victim:
 - a first-aid responder equipped with an emergency kit and the semi-automatic defibrillator (SAD).
 - a staff member assigned to first-aid alert duty that day; they will assist in providing first-aid.
- contact professional emergency services if the situation appears life-threatening and provide them with the exact location, the victim's condition, and the type of incident.
- ☎ Lebanese Red Cross: 140

Initial Care for the Victim

Once the scene is secure, begin with a rapid assessment (c-ABCDE approach).

C – Control of Bleeding

- Check for any severe bleeding and control any major bleeding by:
 - applying direct pressure to the wound.
 - using a pressure dressing.
 - applying a tourniquet, if necessary (above the wound), while noting the time it was applied.

A – Airway

Check whether the victim is able to speak or breathe.

If the victim is unconscious, open the airway by tilting the head back and lifting the chin.

B – Breathing

Observe the victim's breathing for 5 to 10 seconds.

If the victim is not breathing, start CPR immediately.

C – Circulation

Check the pulse at the neck for 5 to 10 seconds.

If there is no pulse and no breathing, begin chest compressions immediately.

If there is a pulse but no breathing, begin assisted breathing.

If available, use an AED (Automated External Defibrillator).

D – Disability

Look for any signs of neurological impairment.

E – Exposure

Observe the patient's skin and overall physical condition.

Positioning and Monitoring the Victim

Positioning

- If the victim is conscious, place them in a lying position.
- If the victim is unconscious but breathing, place them in the recovery position.
- If trauma is suspected, avoid moving the victim (if the victim is in cardiac arrest, place them flat on their back while maintaining head-neck-body alignment and begin CPR).

Monitoring

The responder should closely monitor the patient (level of consciousness, breathing, any change in bleeding).

Transport Arrangements

Transport may be carried out by Lebanese Red Cross ambulances, or private vehicles, if the patient is stable. Every transfer must be reported to the designated campus authorities and communicated to the Emergency Department.

3. EVACUATION IN THE EVENT OF A MAJOR THREAT

Taking Shelter

Immediately move away from windows and gather in the designated safe zones.

Situation Assessment and Alert Activation

The evacuation coordinator (Campus administrator) is responsible for:

- assessing the situation and deciding whether a medical evacuation is required,
- activating the emergency procedure, alerting emergency services, and reinforcing security measures,
- informing the USJ Crisis Cell, which, if necessary, may provide advisory support for complex decision-making, and
- notifying the HDF Emergency Department.

Triage and Extraction

Color	Category	Examples
● Red	Absolute Emergency	Respiratory distress, massive bleeding, coma
● Yellow	Relative Emergency	Serious but stable injury
● Green	Relative Emergency (Minor Injuries)	Simple wounds, closed fractures, minor trauma, psychological shock
● Black	Apparent Death	No signs of life

Once the area has been secured:

- Rescue teams will gradually extract victims who are unable to move on their own.
- Injured individuals who are able to walk may evacuate on their own or will wait to be evacuated by the rescue teams.

Transfer

Category	Clinical Condition	Destination
Absolute Emergency (AE)	Respiratory or circulatory distress, uncontrolled bleeding, severe trauma, coma	Nearest hospital
Relative Emergency (RE)	Simple wounds, closed fractures, minor trauma	HDF
Uninjured	No clinical signs	Secure assembly zone on campus
Deceased	No signs of life	HDF after evacuation of all living victims

Unstable patients may be transferred to HDF at a later stage once they have been stabilized.

Traceability of the Process

Each victim must be identified and have their transfer documented (see USJ Incident Declaration Form).