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SECTION I

GENERAL INFORMATION

Preface
Reducing the threat of fire is possible only with the full cooperation of each faculty member, employee and student. The safety of patients, visitors, fellow employees and yourself may depend upon your knowledge of the fire plan procedures and expedient action during an emergency.

Abbreviated Fire Procedures
1. Remove anyone from immediate danger.
2. Ensure all doors are closed.
3. Activate the fire alarm.
4. Call the operator to report a fire.
5. Try to fight the fire. - When trying to fight the fire, use the acronym P.A.S.S. to operate the fire extinguisher:
   a. P – Pull the pin
   b. A – Aim the extinguisher at the base of the fire
   c. S – Squeeze the handle
   d. S – Sweep side to side

Tips for Good Fire Prevention
1. Keep your working area free from debris.
2. Report unsafe equipment and conditions.
3. Exercise caution when working around or with flammable gases and liquids.
4. Keep all flammable materials stored properly.
5. Know locations of fire fighting equipment and manual alarm pull boxes.
6. Do not chock, wedge or tie doors in the open position.
7. Cooking, or warming of food, including the using of microwaves, is to be performed in designated areas and monitored at all times. Patients and visitors may not bring personal food cooking/warming appliances to be used in any MUHA facility.
When using power strips ensure that they are UL listed and have hospital-grade plug (green dot on plug) if used in the patient sleeping areas. Power strips may not be interconnected with another power strip (daisy-chaining).

Extension cords may not be used as a permanent means of power unless approved.

The hospital prohibits portable space heaters within smoke compartments containing patient sleeping areas and treatment areas. Space heaters outside of smoke compartments must be UL Listed radiator type heaters which do not produce an open flame.

Fire Marshal Responsibilities
The Director of University Risk Management is designated as the Medical University and Medical University Hospital Fire Marshal and is assigned the following duties:

1. Appoint one or more deputy Fire Marshals.
2. Coordinate all fire safety activities for MUSC.
3. Keep the MUSC Vice President for Finance & Administration and the Medical Center Executive Director advised as to the status and efficiency of fire prevention, alarm and extinguishing systems.
4. Ensure fire safety inspections of all facilities, including all fire fighting equipment. Ensure the recording and correction of all deficiencies indicated. Forward inspection reports to the Hospital Environment of Care committee.
5. Continuously ensure that fire prevention practices are being followed.
6. Initiate and assist the appropriate Medical University Hospital administrative officer with fire drills.
7. Report to the MUSC Vice-President for Finance and Administration and/or the Hospital Executive Director any fire hazard which cannot be corrected by available MUSC resources.
8. Make recommendations to the MUSC Vice-President for Finance and Administration and/or the Hospital Executive Director concerning improvements in fire safety.
   a. Investigate fire damage and advise the appropriate University and/or
Medical University Hospital Administration officer of areas which must be removed from service because of electrical, ventilation or structural damage.

Notification/Third Party Monitoring

1. MUHA Buildings excluding ART:
   All Fire alarm devices report to the fire panel which is monitored by All American and the MUHA Alarm Shop. They are also monitored by 2-5600 (MUHA Facilities Support) which will send pages out to appropriate staff.

2. ART:
   ART fire alarm devices report to the fire panels which are monitored by Simplex and the MUHA Alarm Shop. They are also monitored by 2-5600 (MUHA Facilities Support) which will send pages out to appropriate staff.

3. University Buildings:
   All Fire Alarm devices report to the alarm panel and are monitored by All American and 2-4119 (University Control). 4119 will send out pages and radio communications.

Hospital Communication Responsibilities
Answering calls at 2-3333, including appropriate dispatch of calls to MUHA and University Control, and Code Red Group 5 pages on request.

Hospital Maintenance/Engineering and Facilities Responsibilities
Hospital Alarm shop will ensure staff is trained to reset fire alarm panels during non-duty hours, including weekends and holidays. Hospital Maintenance will respond to all Medical Center fire alarms. Hospital Maintenance personnel at the scene will take direction from the Charleston Fire Department. Engineering and Facilities personnel will respond to all University Code Reds and reset panels. University Maintenance personnel at the scene will take direction from the Charleston Fire Department. For information regarding medical gas disruption see Medical Gas Policy A-44.
Medical Center Security Responsibilities
Medical Center Safety and Security personnel will respond to every alarm activated in the Hospital. When the fire alarm is activated, a Medical Center Security officer will respond to the fire scene. The fire scene respondent will investigate for flame, smoke, burning smell, etc. (any indication of the presence of fire). The first respondent must determine if there is:

1. An actual fire emergency (smoke/flames)
   - If an actual fire/emergency exists, immediately implement the five-step fire plan.
   - Notify the Public Safety Dispatcher via radio of “Actual Code Red.”

2. No fire/emergency
   - If no evidence of a fire is discovered, the responder will immediately notify Public Safety Dispatcher of “no fire/emergency” status.

Public Safety Responsibilities
Public Safety officers will confirm the fire location and notify the Dispatcher;

They will also start the orderly evacuation of personnel, direct fire department to the fire. If necessary, Public Safety will summon EMS to care for the injured, and protect property from damage and theft.

SECTION II

ASHLEY RIVER TOWER/UNIVERSITY, CHILDREN’S, RT, AND PSYCHIATRIC HOSPITALS

DETAILED FIRE PLAN PROCEDURES
Personnel in areas that are designated as defend in place or in direct care of patients shall only evacuate the building upon notification of a fire or instructed by emergency response
personnel. If you are in area of fire, first response is to move to adjacent smoke compartment (area of refuge).

Responsibilities of Persons Discovering Fire

1. **Remove** occupants. For a fire discovered in any area, the first responsibility is to save occupants in immediate danger. Refer to the Unit Specific Plan where appropriate.
   a. Supervisory personnel at the scene should determine whether to remove occupants or have them remain in the rooms with the door closed.
   b. Fire in a room holding Non-ambulatory Patients. Don’t waste time obtaining a stretcher or wheelchair. Move the patient out of bed onto a sheet or blanket on the floor and drag them to safety in the corridor just outside the room. (Special care unit patients who cannot be moved any other way may be relocated in beds)
   c. Fire in a room holding Ambulatory Patients. Lead them to a safe location beyond a smoke barrier door.

2. **Ensure** all doors are closed. After occupants are removed from immediate danger, or if a fire is discovered where occupants are not in immediate danger, isolate the fire by closing the door of the room involved.

3. **Activate** the nearest fire alarm. Insert two fingers behind the handle. Pull the handle forward and down. The fire alarm activates a chime that sounds throughout the building informing hospital personnel of a fire emergency. It also activates the flashing strobe lights, which continue to flash until the fire emergency or fire drill is completed. Personnel should close all doors, windows and openings to prevent the spread of smoke and fire and also clear the corridors in case relocation or evacuation becomes necessary.

4. **Call** the MUSC Emergency Operator at 2-3333. Inform the Operator that you are reporting a fire.
   a. Report the exact location of fire or emergency (building, floor, and room number.)
   b. Give a brief description of the emergency. Remain on the phone until
5. **Try** to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

**General Responsibilities of All Other Employees**

Every employee should assume the following responsibilities when a fire alarm is activated:

1. Determine the location of the fire.
2. Close all stairwell and corridor doors.
3. All employees, other than those with specific duties assigned as a part of the fire plan, should close all doors in their area. Remain in your area unless otherwise notified. Do not open smoke barrier doors.
4. Public corridors should be cleared of beds, stretchers, carts and all other obstructions (except mayday carts).
5. Remain alert for instructions broadcast over the fire alarm PA system or specific instructions by on-scene emergency personnel.
6. The responsibility of MDs and students is to assist staff as directed by the unit/area supervisor.

**Responsibilities of Department Directors and Supervisors**

1. Ensure all personnel are familiar with the material contained in the fire plan and aware of how to utilize available fire fighting equipment. Document all training of assigned staff on procedures of the Unit Specific Plan.
2. Assume control of any fire emergency occurring in your immediate area of responsibility.
3. If relocation or evacuation of occupants is necessary, horizontal routes
leading to adjoining smoke/fire compartments should be used. Use procedures in accordance with Unit Specific Plans. Vertical Evacuation (if necessary) will be ordered by the Fire Chief or senior hospital administrator; or if no other evacuation route is safe, accessible or available.

Responsibilities of Hospital Maintenance
1. Follow MUHA Maintenance procedures for fire response from time of alarm activation to all clear.

*** For assistance call Facilities Support Center at 792-5600***

Responsibilities of Medical Center Security

Medical Center Security personnel will respond to all alarms activated in Medical Center facilities. When the fire alarm is activated, a Medical Center Security officer will respond to the fire scene. The fire scene respondent will investigate for flame, smoke, burning smell, etc. (any indication of the presence of fire). The first respondent must determine if there is:

1. An actual fire emergency
   - If an actual fire/emergency exists (flame/smoke/burning smell) immediately implement the five-step fire plan.
   - Notify the Public Safety Dispatcher via radio of “Actual Code Red.”

2. No fire/emergency
   - If no evidence of a fire is discovered, and the area is deemed safe by the Fire Department, the responder will immediately notify Public Safety Dispatcher of “no fire/emergency” status.

SECTION III

UNIT SPECIFIC PLANS

Unit specific plans are required for any unit whose patients require special handling, care or attention due to their condition or treatment. Considerations to be considered shall include but are not limited to:
1. Required equipment to maintain life.
2. Methods required in moving the patients.
3. Medical support required to maintain life once patient is evacuated from the unit.
4. Any specialized procedures, support or other issues required to sustain potential long term care and treatment.

SECTION IV

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SECTION V

OPERATING ROOMS

Due to the critical care provided to patients in the surgical suites, this section will address specific responsibilities for the operating team and may deviate slightly from the standard fire plans.

Policies

1. Electrical cauteries should not be used in the presence of flammable substances or vapors (i.e., alcohol or acetone). Prior to draping, assure there is no pooling of prep solutions and remove prep solutions containers from the room prior to using electrical cautery.

2. All patient care equipment must be certified by the Biomedical Engineering Department, prior to use in the Operating Room. A record of repair and inspection will be maintained in the Biomedical Engineering Department.

3. Hallways are to be kept clear of furniture, stretchers/beds and other equipment causing obstruction of passageways.

Person Discovering Fire.

1. **Remove** the patient. For a fire discovered in the surgical suite, the first responsibility is to save the patient. Patients under general anesthesia will be cared for by the attending Anesthesiologist or resident.
   a. If the situation allows, the surgeon will close the incision.
b. If immediate action is warranted, the surgeon will pack the wound with wet lap pads.

2. **Ensure** all doors are closed. The Nurse in Charge of Operating Room will direct the nursing staff to confine the fire by closing the door and also disconnect electrical appliances if possible. With the approval of the Anesthesiologist in Charge, the installed oxygen supply will be interrupted by closing the control valve. Two staff members will remain with each patient as the evacuation proceeds.
   a. The patient (under general or spinal anesthesia) will be rolled out of the room on the operating table or lowered to the floor by sheet allowing them to be dragged to safety.
   b. Patients under a local anesthetic will be assisted out of the room.

1. **Activate** the nearest fire alarm. Insert two fingers behind the handle. Pull the handle forward and down. The fire alarm activates a chime that sounds throughout the building informing hospital personnel of a fire emergency. It also activates the flashing warning lights, which continue to flash until the fire emergency, fire drill, or test of the fire alarm system is completed. A message will be broadcast over the fire alarm public address System, “Code Red”, and announce the “location” of the fire (e.g., 4th floor). Personnel should close all doors and openings to prevent the spread of smoke and fire and also clear all corridors in case relocation or evacuation becomes necessary. The fire alarm is connected to the City Fire Department who will respond normally within 3 minutes.

4. **Call** MUSC Emergency Operator at 2-3333. Inform the Operator that you are reporting a fire. Give:
   a. Exact location of fire or emergency (building, floor, and room number.)
   b. A brief description of the emergency. Remain on the phone until released by the operator.

5. **Try** to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire,
actions will be under the supervision of the senior employee present.
Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.

Responsibilities for all remaining positions are the same as outlined above.

SECTION VI

ALL OTHER UNIVERSITY BUILDINGS ON CAMPUS
All personnel shall evacuate the building upon activation of fire alarms, notification of a fire or instructed by emergency response personnel.

Responsibilities of Person Discovering Fire: Refer to Unit Specific Plan where appropriate.

1. **Remove** any injured persons in immediate danger.
2. **Ensure** door is closed to isolate the fire.
3. **Activate** the nearest fire alarm in buildings with installed alarm systems. Insert two fingers behind the handle. Pull the handle forward and down. The alarm will sound in all parts of the building. If the building is not equipped with a fire alarm system, alert occupants by voice command to evacuate.
4. **Call** the MUSC Emergency Operator at 2-3333. Inform the Operator that you are reporting a fire. Give:
   a. Exact location of fire or emergency (building, floor, and room number.)
   b. A brief description of the emergency. Remain on the phone until released by the operator.
5. **Try** to fight the fire. The decision to fight the fire with available extinguishing equipment or whether the door to the room containing the fire must remain closed should be made by the senior employee present. If fighting the fire, actions will be under the supervision of the senior employee present. Responsibility for fighting the fire is transferred to the Charleston Fire Department upon arrival.
6. Responsibility for fighting the fire is transferred to the responding Fire Department, upon arrival.
Department Heads and Supervisors
1. Ensure all personnel are familiar with the material contained in this plan and trained in the use of available fire fighting equipment.
2. Assume control of any fire emergency which occurs in your immediate area of responsibility.
3. Manage the evacuation of any visitors in the immediate area of a fire. The procedure should be carried out in a calm manner to avoid panic.
4. Department heads may designate monitors and alternates to help in clearing the area of visitors, students and staff.

Engineering and Facilities
1. Representatives from Physical Plant/University Maintenance will respond to all University fire alarm activations.

Public Safety Officers
The Public Safety Officer on duty will be responsible for clearing the corridors of visitors and personnel, allowing firefighters to proceed directly to the fire scene.
1. Be prepared to receive city firefighters and direct them to the standby elevator (if applicable).
2. Hold an elevator for use by the Fire Department until relieved by Engineering and Facilities personnel.

Evacuation
1. All personnel, except those whose duties require them to be in the fire area, will evacuate the building in an orderly manner.
2. Evacuation will be downward through stairwells leading to the outside and away from the building to allow access by firefighters.

SECTION VII
FIRE DRILLS AND FIRE ALARM TESTING
Fire Drills
Fire drills will be conducted periodically, but at least every quarter for each shift for inpatient facilities and annually in all other facilities. The date and time for the drills
Testing
Testing of the alarm system will be conducted in accordance with applicable regulatory requirements. In all cases, a prior announcement of the test will be broadcast over the fire alarm PA system if so equipped: “WE ARE CONDUCTING A TEST OF THE FIRE ALARM SYSTEM. PLEASE CONTINUE WITH YOUR NORMAL ACTIVITIES UNTIL FURTHER NOTIFICATION.” (Repeat). Immediately upon the conclusion of the test, the Alarm shop employee conducting the test will ensure broadcast of the following announcement: “TESTING OF THE FIRE ALARM SYSTEM IS COMPLETE. (Repeat)

SECTION VIII

HOLIDAY DECORATIONS
The holiday season can be joyous and festive, however, many fire incidents occur each year due to negligence or disregard for safety. The following policy establishes requirements to consider before decorating. Consult personnel from Occupational Safety and Health for final determinations. The Director of Safety, Security and Volunteer Services establishes separate, additional guidelines to be followed in the Hospital, by clinical and non-clinical departments.

Decorations
1. Decorations shall not be placed in any area that will obscure an exit or
interfere with egress from the area.

2. Decorations of an explosive or highly flammable character are prohibited from all buildings. Decorations should be flame resistant. Combustible decorations are prohibited in health care areas, unless of such limited size or quantity that will not contribute to the development or spread of fire, such as photographs and paintings.

3. No candles or other open flame decorations are allowed.

4. All electrical components must be hospital grade (NFPA 99) UL Approved.

7. Christmas tree lights must be unplugged at the end of the work period and when no one is present to monitor them.

8. Live Christmas trees are prohibited.

**Inspection**
Decorations will be inspected for compliance with the aforementioned rules. Any not in compliance will be removed.

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**SECTION IX**

**TURKEY FRYERS**
MUSC Fire and Life Safety, OSHP, prohibits the use of turkey fryers (which immerse the turkey in hot oil) inside MUHA buildings. The National Fire Prevention Association discourages use due to a significant potential danger of fire. In the event a department would like to fry a turkey, contact the OSHP office at 843-792-3604 for approval and further information.