MEDICAL UNIVERSITY OF SOUTH CAROLINA (MUSC)

BOMB THREAT POLICY

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Medical Center Policy Manual

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Policy:

To provide a plan of action that ensures an immediate, calm, and orderly response in the event of a bomb threat.

Procedure:

MUSC Medical Center employees will respond calmly and immediately to any known threat of an explosive device that could endanger the safety of the Hospital's occupants. THE RESPONSE WILL BE IMMEDIATE, ORDERLY, AND CALM. NO ANNOUNCEMENTS WILL BE MADE OVER THE PUBLIC ADDRESS SYSTEM. THERE SHOULD BE NO DISCUSSIONS OF THE BOMB THREAT IN PUBLIC OR WITH ANYONE UNNECESSARILY. REMAIN CALM AND DO NOT START RUMORS.

If a suspicious item is found or received, do not touch or handle the item in any way. Do not panic. Follow the procedures listed below:

TELEPHONE BOMB THREAT

A. Call Center Employee/Employee Receiving Bomb Threat Telephone Call

1. Remain calm and obtain as much information as possible. Complete the "Telephone Call Bomb Threat Check List."
2. Attempt to get another employee to listen to caller on another telephone.
3. Notify immediate supervisor or person in charge of work area.
   a. Call Public Safety at 2-4196.
   b. **During normal working hours (8 a.m. – 5 p.m.):**
      The supervisor (or person in charge) must immediately contact Hospital Administration by dialing 792-4000 or 792-3232.
   c. **After normal working hours (5 p.m. – 8 a.m.):**
      The supervisor (or person in charge) must immediately contact the Hospital Services Coordinator (HSC) by dialing 2-2123. The purpose of this telephone call is to inform the Administrator on-call and/or the HSC of the telephone bomb threat call.

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B. Administrator of Clinical Services/Hospital Services Coordinator on Duty:

1. Notify Vice President for Clinical Operations and Executive Director, Medical Center, notification.
2. If and when requested by police, quietly and confidentially notify the nurse managers/charge nurses of all nursing units and instruct them to conduct a bomb search of their units. CAUTION EACH NURSE NOT TO ALARM PATIENTS. If bomb location is known, the HSC/Administrator of Clinical Services will contact units in the threatened area first to instruct the nursing personnel to conduct a thorough search of their units and report their findings. If no explosive or bomb is found, the HSC/Administrator of Clinical Services must contact the nursing personnel of the remaining units and instruct them to conduct a thorough search of their units and report their findings. IMPORTANT: INSTRUCT EACH NURSE MANAGER/CHARGE NURSE TO CAUTION THEIR STAFF NOT TO TOUCH ANYTHING SUSPICIOUS LOOKING.
3. Instruct each Nurse Manager/Charge Nurse to report the results of their unit’s search to the Disaster/Incident Command Center by dialing 2-3133 or 2-7613 or Hospital Administrator on-call/HSC by dialing 2-2123 (after normal working hours, 5 p.m. – 8 a.m.).
4. Report immediately to the conference room (room 205C) for briefing.
5. Evaluate a possible plan for patient evacuation and the shut-off of oxygen, electricity, etc. to the danger areas.

C. Hospital Administrator On-Call/Disaster/Incident Control Officer

1. Notify the Vice President for Operations, Executive Director, Medical Center, Director of Public Safety, Medical Director, Disaster/Incident Control Officer, Administrator of Clinical Services, Manager of Medical Center Security, Administrator for Facilities Management, Director of Occupational Safety and Health, and the Director of Engineering and Facilities (Physical Plant) to attend a briefing in the Disaster/Incident Command Center, room 205C.
2. During normal working hours, notify the Clinical Department Chairmen and Administrative Department Leadership to instruct their staff to conduct a thorough search of their areas of responsibility. If bomb location is known, then only notify bomb location areas to conduct searches. Each clinical department chairman shall be instructed to report the results of their searches to the Disaster/Incident Command Center (room 205C) by dialing 2-3133 or 2-7613.

Note: All searches conducted in employees’ work areas during regular work hours will be conducted by employees. Exception: Searches will be conducted by Medical Center Security appointed search teams after regular working hours, if the bomb's location has been reported to be in employees' work area.

3. Conduct the briefing in the Disaster/Incident Command Center, room 205C, in the absence of the Vice President for Operations, Executive Director, Medical Center or his designee.
4. Advise the personnel of Medical Center Security and the Information Desk if visiting hours is to be suspended.
5. Advise the personnel of the Admitting Office if admissions are to be suspended.
6. Establish a manpower pool in the 2 West Amphitheater as required.
7. Inform duty repairman of need to cease walkie-talkie and cellular phone transmission throughout the hospital until further notification.
8. Announce on Public Address System the need for hospital staff to cease hospital communication and call supervisor for further instructions.

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D. Medical Center Security

1. Coordinate and facilitate bomb search in collaboration with Director of Public Safety or designee.
2. Assign Medical Center Security officers to secure areas as appropriate

E. Department of Public Safety

1. Contact and brief Medical Center Security, Manager or Coordinator, by dialing 2-2123.
2. Organize, coordinate, monitor, and receive reports of all bomb searches throughout the Medical Center.
3. Direct and coordinate the activities of all public service agencies responding to the bomb threat notification.
4. Instruct all public service agencies responding to remain at the designated staging area pending further information/instructions.
5. Develop and maintain internal procedures and check lists necessary to implement policy.

F. Hospital Communications

Perform duties as outlined unless otherwise instructed by Hospital Administration.

G. Administrator of Facilities Management/Duty Maintenance Repairman

1. Report to the Disaster/Incident Command Center, room 205C, for briefing, if appropriate.
2. If location of bomb is identified set elevators for manual control in the threatened building.
3. Plan for possible shut-off of oxygen, gas and/or steam lines and electric power, as deemed necessary.
4. Confer with the staff at the Disaster/Incident Command Center as to the most effective way to accomplish a shut-off of all utilities required.

H. Director of Engineering and Facilities (Physical Plant)/Duty Maintenance Repairman

1. Report to the Disaster/Incident Command Center, room 205C, for briefing, if appropriate.
2. If location of bomb is identified set elevators for manual control in the threatened building.
3. Plan for possible shut-off of oxygen, gas and/or steam lines and electric power, as deemed necessary.
4. Confer with the staff at the Disaster/Incident Command Center as to the most effective way to accomplish a shut-off of all utilities required.

I. Clinical Department Chairmen and Administrative Leadership

Initiate a search of respective areas when notified, and report the results to Hospital Administration at extension 2-3232 during normal working hours (8 a.m. - 5 p.m.) or 2-7613 or 2-3133, after hours (5 p.m. - 8 a.m.).

J. Bomb Search Guidelines

1. **DO NOT TOUCH OR REMOVE ANY STRANGE OR SUSPICIOUS OBJECTS. TELEPHONE THE DISASTER/INCIDENT COMMAND CENTER AT 2-7613 OR 2-3133 OR PUBLIC SAFETY AT 2-4196 TO REPORT YOUR FINDINGS.**

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2. All requests for assistance should be directed to the Disaster/Incident Command Center at 2-7613 or 2-3133 or Public Safety at 2-4196.
3. Do not attempt to communicate via radio or walkie-talkie during a bomb threat situation. The radio transmission energy can cause premature detonation of an electric initiator (blasting cap).
4. First, search suspected location, if known.
5. Search all public areas (lobbies, bathrooms, waiting rooms, cafeteria, etc.).
6. Search all trash cans/receptacles.
7. Locked areas should be the last areas searched.
8. Place a strip of tape across the doorway or opening leading to areas in order to indicate that the area has been searched.
9. Report completion of search to the Disaster/Incident Command Center at 2-7613 or 2-3133.

K. Discovery of Suspicious Item

DO NOT TOUCH OR DISTURB IN ANY WAY. KEEP CALM. DO NOT PANIC. INFORM PUBLIC SAFETY AT 2-4196 OR DISASTER/INCIDENT COMMAND CENTER AT 2-3133 OR 2-7613 OF LOCATION OF SUSPICIOUS ITEM.

L. Hospital Administrator On-Call Responsibilities

1. Assist Vice President for Operations, Executive Director, Medical Center, with decision to evacuate patient area. Note: The decision to evacuate a patient area will be made by the Vice President for Operations, Executive Director, Medical Center, and members of the various public agencies present. Evacuation will normally be horizontally or to a lower floor when necessary. The areas on floors above and below the danger areas will probably also be evacuated if evacuation is necessary.
2. Notify the May Day Team to stand-by.
3. Arrange for all available mattresses to be brought to the scene to shield the device.
4. Open all doors and windows in area of danger.
5. Ensure that the danger area perimeter of 300 sq. feet has been established above, below, and in the area of question.

M. Detonation of the Device

1. Public Safety must notify Hospital Administration.
2. The Hospital Administrator on-call, in the absence of the Vice President for Operations, Executive Director, Medical Center, must page the Chairman, Department of Surgery, or, in his absence, the Chief Surgery Resident who shall assign a second May Day Team to the scene.

N. All Clear

Hospital Administration will give the "all clear" to Hospital Communications who will announce, "All units resume normal duties," if the alert was in the hospital. If in one of the other buildings, the "all clear" will be accomplished via telephone.

O. Critique

Hospital Administration staff and key personnel will critique the operation in the Disaster/Incident Command Center (205C).
P. News Release

Release of information concerning the incident will be through the University Public Relations office.

WRITTEN BOMB THREAT

A. Employee Receiving Written Threat

1. Save all materials received with threat note.
2. Handle threat message and materials as little as possible.
3. Notify immediate supervisor and Public Safety at 2-4196 who will take charge of all evidence.

Note: Every possible effort should be exerted to retain evidence such as fingerprints, handwriting or typewriting, paper, and postal marks. This evidence can be used to identify sender and/or writer.

B. Immediate Supervisor’s Responsibilities

1. Telephone Hospital Administration at 2-4000 or 2-3232 during normal working hours, or the HSC at 2-3333 after regular hours to report the receipt of the written threat.
2. Provide as much detail as possible.
3. Telephone Public Safety at 2-4196 to report the incident, provide as much detail as possible.

C. Administrator On-Call/Hospital Services Coordinator

Perform duties as previous outlined in the “Telephone Bomb Threat” policy, Sections B and C.

D. Medical Center Security

Perform duties as outlined in Section D of “Telephone Bomb Threat” policy.

E. Department of Public Safety

Perform duties as outlined previously in Section E of “Telephone Bomb Threat” policy, unless otherwise instructed by Hospital Administration.

F. Hospital Communications

Perform duties as outlined unless otherwise instructed by Hospital Administration.

G. Administrator of Facilities Management/Duty Maintenance Repairman

Perform duties as outlined previously in Section G of “Telephone Bomb Threat” policy, unless otherwise instructed by Hospital Administration.

H. Director of Engineering and Facilities (Physical Plant)/Duty Maintenance Repairman

Perform duties as outlined previously in Section H of “Telephone Bomb Threat” policy unless otherwise instructed by Hospital Administration.
Appendices: Appendix A - Bomb Threat Checklist
Appendix A

Bomb Threat Checklist
(A-58 – Bomb Threat Policy)

Note: All procedures addressed in the "Telephone Bomb Threat" section of this policy apply to the "Written Bomb Threat" as well. Please refer to appropriate sections for details required.

1. Keep calm! Do not get excited or excite others.
2. Note time call received (a.m./p.m.) and terminated (a.m./p.m.).
3. Write the exact words of the caller.
4. Delay – ask caller to repeat.
5. Ask the following questions:
   - When is it set to explode (a.m./p.m.)?
   - Where is it located? Building____ Room Number____
   - What floor?____ What Area____
   - What type of bomb?__________________________
     Description:__________________________________________________________
     - Why kill or injure innocent people?

6. Description of voice? (Circle as many as applicable)
   Male  Female  Nervous  Young  Old  Middle Aged  Rough
   Refined  Accent (what kind)  Speech Impediment

7. Did the person use any unusual phrases? Yes  No
   What were they?____________________________________________________

8. Did you recognize the voice? Yes  No
   If so, who do you think it is?________________________________________

9. Was there any background noise (i.e., music, running motor, etc)?
   Traffic sounds:_______________________________________________________
   Whistles:___________________________________________________________

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Bells:________________________________________

Horns:_____________________________________

Aircraft:___________________________________

Machinery:__________________________________

10. Any other clues?  Yes  No
What are they?_________________________________

11. Did the caller indicate in any way that he knew our hospital?  Yes  No
Note his words:_________________________________

12. Note the phone line in which the call came in:_________________________

13. Notify Hospital Administration in the same sequence as for a disaster call (See MUSC Medical Center Disaster/Incident Manual)

14. Remain calm and do not talk to others about this incident.
Public Safety may receive bomb threats through two methods - by phone or by mail. Upon receipt of a bomb threat, take the following action:

**Threats by Phone**

1. Dispatcher  
   Call received on phone number  
   Try to keep Caller talking on the phone, so the call can be recorded.

2. Dispatcher  
   If possible, get another person on the phone to listen and take notes. 
   Calmly ask the following questions:
   
   - When will it explode?  
   - Where is it?  
   - What building?  
   - What floor?  
   - What area?  
   - What type of bomb?  
   - What does it look like?  
   - Why kill or injure innocent people?

**Description of Voice**

Male ___  Female ___  Young ___  Middle Age

**OPERATIONAL PLAN #4**

1
Old ___ Race ___ Nervous ___ Refined

Accent __________ Nationality

Speech Impediment

Unusual Phrases

Was the voice familiar? __________ Who?

Background Noise

Music ____ Running Motor ____ Traffic

Whistle ____ Bell ____ Horn ____ Aircraft

Machinery ________ None ____ Other _______ (Explain)

3. Dispatcher Notify the Supervisor and Patrol Commander.

4. Supervisor Designate Command Post 300 to 600 feet from and out of view of the scene. Have all responding officers assemble at the Command Post. (CALEA 46.1.3.b)

NOTE: If in the Medical Complex, the Command Post will normally be established in the Conference Room #205C. As determined by the Supervisor or higher authority, the Command Post may be re-located as the situation dictates.

5. Dispatcher Notify the following: (CALEA 46.1.3.d)

a. Operations Support Commander
b. On-Call Investigator;
c. Director
d. Patrol Commander
e. Paul Moss

OPERATIONAL PLAN #4
f. On-Call Administrator at 792-3131 or see call list if after hours  
g. Fire Department and CPD - 911  
h. If at MUSC, Hosp. Communications 2-3334;  
i. Physical Plant (MUSC) 792-4119;  
j. If at MUSC, Vice President of Finance and Administration 792-5050, President 792-2211;  
k. University Safety at 792-3604, after duty hours, see on call list;  
l. Radiation Safety at 792-4255, after duty hours, see on call list.  

NOTE: To minimize overreaction and panic, our response must be low key, yet timely and professional - No Blue Lights.  

6. Investigator  Interview person who received call and advise the on-scene Commander of information (CALEA 46.1.6.a)  

7. Supervisor  Establish a security perimeter (300 to 600 feet radius) around the scene. If in a building consider floors above and below. (CALEA 46.1.4.a)  

8. Supervisor  Remind officers not to transmit within 300 feet of scene. (CALEA 46.1.6.a)  

9. Dispatcher  Obtain permission from The City Fire Chief to activate fire alarm for evacuation purposes and notify on-scene Commander. (CALEA 46.1.4.b)  

10. Supervisor  Assign officers to evacuate the effected area. (CALEA 46.1.4.b)  

NOTE: Hospital facilities will not be evacuated unless directed by Chief, Patrol Commander, EOD, Fire Chief, or Medical representative. NOTE: If not in Hospital, activate fire alarm. (CALEA 46.1.4.b)  

a. First officer who arrives at the Command Post will  

OPERATIONAL PLAN # 4
establish radio communication with the Supervisor or other Senior Staff Member (Sgt or above) and follow his/her instructions. (CALEA 46.1.6.a)

b. Second and subsequent officers must be designated to immediately evacuate the scene from the top floor down. Upon completion of evacuation, officers report back to Command Post. (CALEA 46.1.4.b)

c. Use the mega-phone and direct evacuating personnel to a safe location, outside of the security perimeter.

d. Post officers to prevent unauthorized re-entry.

11. Dispatcher 
If needed, notify CPD to reroute or control traffic. (CALEA 46.1.3.d, 46.1.4.e)

12. Director/Patrol Cmdr. 
Consider having Physical Plant turn off utilities going into the area - gas, oxygen, electricity and steam. (CALEA 46.1.4.e)

13. Dispatcher 
When directed by Supervisor or On-scene Commander, request assistance of the Charleston City Police Bomb Dog by calling 577-7074. Advise the Dispatcher of all known information. (CALEA 46.1.4.e, 46.1.6.e)

14. Patrol Commander 
Organize a thorough search of the effected area. Search party should include members who work in the area.

15. Supervisor 
Public Safety will manage the search. Have search parties retain and monitor radios. Do not transmit within 300 feet of the suspected bomb location.

16. Patrol Commander 
Before starting search, thoroughly brief all members on safety, communications, what to look for, and what to do if a suspicious object is found. (CALEA 46.1.3.g)

17. All Officers 
Upon discovery of a suspicious object, **Do Not Touch or Disturb It**. The search party must inform the Command Post, remove all personnel from the danger area and if in a patient area, notify the Charge Nurse. (CALEA 46.1.3.g)

Dispatcher - Notify CPD EOD at 577-7074 and request their...
response.

- All Officers - Upon arrival of EOD, adjust the size of the security area according to their instructions.

- Investigator - If EOD is able to render the bomb safe, consider processing for evidence. Coordinate with SLED and FBI.

**Threats by Mail**

Upon being notified that a threat has been initiated by mail, take the following actions:

1. Dispatcher
   
   Instruct the caller, who received the letter, to refrain from handling the correspondence further.

2. Dispatcher
   
   If available, dispatch an Investigator to contact the caller. In the absence of an Investigator, dispatch the Supervisor or Patrol Commander.

3. Supervisor
   
   Remind responding officer to handle the correspondence in a manner to preserve latent prints and other evidence.

4. Investigator
   
   Notify the Director and Patrol Commander. They will advise as to further notifications.

**SUSPICIOUS LETTER/PACKAGE**

Suspicious letters or packages may be received through the mail or found in an office which falls short of amounting to a bomb threat. When this occurs, take the following action:

1. Dispatcher
   
   Dispatch an Investigator to examine the item in question. If no investigator is available dispatch the Shift Supervisor.

2. Investigator
   
   In the event the letter/package cannot be identified or otherwise explained, consider having it X-Rayed. However, if there is reason to believe that it may be an actual explosive leave the letter/package alone and implement bomb threat procedures. As soon as possible, advise the dispatcher which Procedure will be implemented.

3. Dispatcher
   
   If the item is to be X-Rayed notify the following: (State that we
have a suspicious item to be X-Rayed) (CALEA 46.1.3.d)

a. Medical Center Safety and Security - 792-4831;

b. Radiology

1) Normal duty hours - Ray Manigault 792-0247 or Beeper 1197;

2) After Hours - Ralph Smith 792-7450 or Beeper 12419;

c. Shift Supervisor;

d. Operations Support Commander;

e. Director and Patrol Commander;

4. Supervisor
Post one PSO at the Morgue Parking Lot Entrance. Keep unauthorized personnel out. Do not allow a crowd to gather on the street.

5. Safety & Security
Assign an officer in the vicinity of the Morgue Area and Sabin St. Exit. DO NOT allow anyone to enter the Parking Lot unless specifically authorized by the investigator.

6. Investigator
Transport the item, via the sidewalk, to the Hospital Morgue Parking lot on Sabin Street. Radiology will meet you there with the portable X-Ray machine.

7. Investigator
After being X-Rayed, if the item contents are safe, return the item and take no further action.

8. Investigator
If the contents are determined to be a possible explosive device, leave it alone, notify Headquarters, and implement Bomb Threat procedures.

9. Investigator
Provide progress reports to the dispatcher as needed.

OPERATIONAL PLAN # 4