Hospital Surge Capacity

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Terrorist attack, natural disaster, or other public health emergency, cause devastating consequences that hospitals could not absorb the thousands of victims generated by the catastrophe. In these events we faced with two entities; Surge Capacity and Surge Capability. Surge Capacity is the ability to manage increased patient care volume that otherwise would severely challenge or exceed the existing medical infrastructures.

Surge Capability is the ability to manage patients requiring unusual or very specialized medical evaluation and intervention, often for uncommon medical conditions.

Even if hospitals can increase bed capacity by 20% to 30%, as some suggest, the problem of US national policy for emergency preparedness is calling for hospitals to accommodate surges of 500 new patients per million population in a disaster is present. One possibility is to rapidly increase hospital beds by providing emergency discharge of elective inpatients, endpoint recovery patient and do not admit new unmerging patients or change potential vacant places in hospital to patient's room or bed for admission. Another problem is staff and stuff requirements to deploy medical services and cares. Several organizations and systems currently exist that can deliver medical providers to a stricken area. Unfortunately, all of these have serious limitations that would make it difficult for hospitals to use the health care workers provided by such entities.