## Disaster Management Education: Emergency Medicine Residency Survey

#### \* 1. What is the name of your Emergency Medicine Training Program?

#### \* 2. Where is your program located?

City/Town:	
State/Province:	
Country:	

#### \* 3. Which leadership role do you fill at your residency program?

Program Director

Chief Resident

### \* 4. In what type of hospital(s) do your Emergency Medicine residents train? (check all that apply)

- Teaching Hospital
  Level I Trauma Center
  Level II Trauma Center
  Community Hospital
  Urban Center
  Suburban Site
  Rural Site
- \* 5. What is the accrediting institution of the program?

### \* 6. Which year did the emergency medicine residency program start?

\* 7. What is the duration of your emergency medicine training program?

\* 8. Is there any Disaster Management training in your Emergency training program? For example: Lectures, rotations, workshops, drills, etc

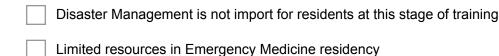


\* 9. Which of the following disaster management competencies is/are provided in your program, and in which form? (In your Curriculum)

	NONE	LECTURES / SEMINAR	WORKSHOP / COURSES	TABLE TOP EXERCISE	FIELD or HOSPITAL DRILLS / SIMULATIONS	ROTATIONS
IMS/ICS Incident Command System						
Recognition, notification, initiation,						
Communication (inter/intra-agency,media)						
Resource management						
Volunteer management						
GO- and NGO sponsored response teams						
Public health and safety						
Patient triage						
Surge capacity/capability						
Patient identification and tracking						
Transportation						
Decontamination						

## **Disaster Management Education: Emergency Medicine Residency Survey**

# \* 10. If you answered no to all or most of the above, why do you not have Disaster Management training as part of your Emergency Medicine training program?



Limited time for residents during Emergency Medicine residency

Not Applicable (N/A)

Other (please specify)

#### \* 11. Do you have a Disaster Medicine fellowship program in your department or hospital?

) Yes

) No

## 12. Do you have a specific track or specialty training course for your residents in disaster medicine? If so, what does it entail?

🔿 No

Yes (please specify)

\* 13. The amount of time your residency spends on Disaster Medicine training is:

- Too little
- Just right
- 🔵 Too much

\* 14. Is there anything else you wish to share regarding disaster medicine/management training at your program?

) No

Yes (please specify)

Thank you for your time and participation in this survey.

