|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Supplementary Table S1. Group characteristics divided by tertiles of distance to the closest nuclear power plant (*n* = 36) | | | | | | |  |  |
|  |  | 1st tertile | | 2nd tertile | | 3rd tertile | | *p*-value |
|  |  | Median [IQ]  /Frequency (%) | | Median [IQ]  /Frequency (%) | | Median [IQ]  /Frequency (%) | |  |
| Number of beds |  | 600 | [344-689] | 738 | [528-1050] | 663.5 | [569-820] | 0.097 |
| Total number of employees |  | 1190.0 | [722-1663] | 1557 | [1143-2999] | 1442.5 | [1001-2205] | 0.223 |
| Tertiary Hospital |  | 8 | 67% | 9 | 75% | 7 | 58% | 0.903 |
| Estimated disasters (duplicated responses) | Earthquake | 12 | 100% | 11 | 92% | 12 | 100% | 1.000 |
|  | Tsunami | 5 | 42% | 4 | 33% | 2 | 17% | 0.539 |
|  | Typhoon | 4 | 33% | 7 | 58% | 4 | 33% | 0.520 |
|  | Landslide | 2 | 17% | 1 | 8% | 1 | 8% | 1.000 |
|  | Nuclear disaster | 3 | 25% | 5 | 42% | 3 | 25% | 0.731 |
| Previous mass casualty incident (>5 injuries) experience |  | 7 | 58% | 4 | 36% | 2 | 17% | 0.168 |
| Previous disaster with activation of emergency operation center in the hospital |  | 9 | 75% | 6 | 50% | 7 | 58% | 0.576 |
| Disaster management department exists |  | 5 | 42% | 4 | 33% | 3 | 25% | 0.903 |
| Dedicated facilities for radiation/nuclear disaster (including decontamination) |  | 8 | 67% | 6 | 50% | 3 | 25% | 0.154 |
| Nuclear disaster facility is facilitating independently from the main hospital building |  | 5 | 63% | 3 | 50% | 2 | 50% | 1.000 |
| Creating a standard operation procedure using the facility above |  | 6 | 50% | 2 | 17% | 6 | 50% | 0.143 |
| Provides regular training for radiation/nuclear disasters |  | 9 | 75% | 10 | 83% | 8 | 67% | 0.887 |
| Establishing hospital network in the prefecture |  | 10 | 83% | 8 | 67% | 9 | 75% | 0.887 |
| Patients with high dose radiation exposure similar to the Tokaimura incident, Japan, 1999 can be treated |  | 2 | 17% | 3 | 25% | 3 | 27% | 0.887 |
| Countermeasures stockpile (duplicated responses) | 1. Ca-DTPA | 2 | 18% | 3 | 25% | 1 | 8% | 0.656 |
|  | 2. Zn-DTPA | 2 | 18% | 2 | 17% | 1 | 8% | 0.852 |
|  | 3. Prussian blue | 2 | 18% | 3 | 25% | 2 | 17% | 1.000 |
|  | 4. Potassium iodide | 8 | 73% | 7 | 58% | 6 | 50% | 0.625 |
| Is it possible to treat patients who inhaled or ingested plutonium accidentally? |  | 2 | 17% | 3 | 27% | 5 | 42% | 0.422 |
| Hospital business continuity plan in case of radiation/nuclear disaster exists? |  | 1 | 8% | 0 | 0% | 0 | 0% | 1.000 |
| Acknowledging the importance of business continuity plan for radiation/nuclear disaster |  | 10 | 83% | 11 | 92% | 8 | 67% | 0.447 |
| Acknowledging difficulties in creating business continuity plan |  | 10 | 83% | 10 | 83% | 11 | 92% | 1.000 |
| Acknowledging difficulties in assessing the damage caused by radiation/nuclear disaster |  | 7 | 58% | 8 | 73% | 10 | 91% | 0.247 |
| Preparing for other types of radiation disasters such as dirty bomb, etc. |  | 2 | 17% | 4 | 33% | 5 | 42% | 0.539 |
| Acknowledging importance of planning risk communication for radiation disaster |  | 12 | 100% | 12 | 100% | 12 | 100% | 1.000 |
| Recognize importance of risk communication for the hospital |  | 12 | 100% | 12 | 100% | 12 | 100% | 1.000 |
| Establishing standard operation procedure for risk communication in case of radiation/nuclear disaster |  | 1 | 8% | 0 | 0% | 1 | 8% | 1.000 |
| Contact person for media in case of radiation/nuclear disaster |  | 5 | 42% | 5 | 42% | 5 | 42% | 1.000 |
|  | | | | | | | | |