Always call 911 for fire, medical, or police emergencies
About this guide

This quick reference is produced by Dartmouth’s Emergency Management Group (EMG). It covers potential emergencies on campus. These easy-to-use guidelines will help you deal with emergencies in their early stages.

Please keep this handbook easily accessible. It is also available online at www.dartmouth.edu/~news/emergency.
Call 911

Always call 911 to report emergencies. Call from a safe location and remember to stay calm. Gather as much information as you can. Give a telephone number or safe location where the emergency responders can call or meet you and wait for the responders at that location.

You will be asked the following questions:

1. Where is the emergency located?

2. What is the emergency (fire, medical, hazardous material, threatening behavior, etc.)?

3. How did it happen?

4. When did it happen?

5. Who are you?

Gather any other information that may be useful for the emergency responders (e.g. are there any injuries involved?).

Do not hang up until instructed to do so by the dispatcher.

Note: Always call 911 in a potential emergency situation. Even if it turns out not to be an emergency, your quick response could make a difference.
Notes:
Fire

Never fight a fire if it has left its site of origin, if you are not trained in fire extinguisher use, or if you lack a safe way to escape should your efforts fail.

If you see smoke or fire, remember C.A.R.E., which stands for:

**Contain** the fire by closing all doors as you leave the building.

**Activate** the nearest fire alarm pull station. Pull stations are located near all building exits.

**Report** the fire by dialing 911. (To report fires in the Borwell or Rubin buildings, dial 5555.)

**Evacuate** or extinguish. In most cases, it is best to leave the building using the nearest fire exit.

**Fire Extinguishers**

A fire extinguisher should only be used when:
- You have been trained.
- You have the proper type and properly charged unit for the fire you are fighting.
- You have first contained the fire, activated the building alarm, and reported the fire.
- You have your back to an unobstructed exit.
- Everyone else has left the area.
- There is a minimum of smoke or flames.

**Never** use more than one extinguisher. If the fire cannot be brought under control within 30 seconds, then abandon your effort, close the door(s), and evacuate immediately.
Notes:
Fire Prevention Tips

The best defense against fire is always prevention. Take a moment to read these basic tips:

• Keep pathways clear. Do not block exits, fire extinguishers, or sprinkler heads. (Sprinklers require 18-inch clearance.)

• Limit use of extension cords and power strips. Never use an extension cord and a power strip together.

• Plug major appliances directly into wall outlets. Never use extension cords on refrigerators, copiers, or microwaves.

• Shut off electrical equipment at the end of the day. Check items such as computers (unless you are instructed to leave them on), coffee pots, copiers, fans, etc.

• Check for frayed wires and missing grounding plugs. Have faulty equipment repaired immediately.

• Never store combustible material near a heat source. Materials like wood, paper, and cardboard must be kept at least three feet from heat sources.

• Store flammable items in designated cabinets. Some examples include aerosol cans, gasoline, and oil-based paint.

• Space heaters must be approved by Facilities Operations and Management. Call (603) 646-2485 for more information.

• Smoke in designated areas only. Be certain to properly extinguish all smoking materials.

For more prevention tips or additional assistance, contact Environmental Health and Safety at (603) 646-1762, or visit www.dartmouth.edu/~ehs/fire.html.
Building Evacuation

Remember

1. Walk, don’t run, to nearest exit.

2. Leave the building immediately during an alarm.

3. Do not investigate the source of a fire or hazardous material emergency.

4. Use stairs, not elevators.

5. Assist people with special needs.

6. Designate a meeting location outside, away from entrances.

7. Wait for instructions from your supervisor before returning to your building after an evacuation.

8. Call 911 if you are unable to evacuate.

Each department should have a building evacuation plan that is available at all times. If you do not have such a plan, Safety and Security can help you create one. Call (603) 646-4000.

For more detailed information on building evacuation visit www.dartmouth.edu/~ehs/fire.html or call Environmental Health and Safety at (603) 646-1762.
Notes:
Special Assistance and Disability Emergency Evacuation Plan

Persons with special needs and/or disabilities may require special assistance during an evacuation or other emergency. It is recommended that these individuals take responsibility in developing their own personal emergency plans.

Confidential help in developing a plan

• If you are an undergraduate student with a disability or other special needs during an emergency, contact the Director of Student Disabilities Services, Cathy Trueba, Academic Skills Center, 301F Collis Center, (603) 646-2014 (voice), (603) 646-1564 (V/TTY).

• If you are a student in the graduate program or at one of the professional schools, contact the disabilities liaison for your program.

• If you are a faculty or staff member with a disability, or you wish to assist a disabled member of the faculty or staff, contact the 504/ADA Campus Coordinator and Deputy Director for EO/AA Programs, Katherine Burke, Office of Institutional Diversity and Equity, 6018 McNutt Hall, (603) 646-3197.
Notes:
Special Assistance and Disability Emergency Evacuation Plan

General tips for developing a plan

• Make two plans—one for use if you can be assisted by others and one if you are alone.
• Ask others for input, such as community directors, staff, faculty, supervisors, and co-workers.
• Contact Safety and Security, Facilities Operations and Management, or Environmental Health and Safety for evacuation information, such as identified areas of refuge and where evacuation equipment is available.
• Choose two evacuation routes for each building.
• Set up a buddy system.
• Do not consider using elevators in your plan.
• Consider alternative carry and/or communication methods, if necessary.
• Think about your needs for preparedness kits, such as disability-related equipment, communication devices, service animal food, and three days worth of medication, if applicable.
• Have a list of all your medications (name, dose, frequency, and name of doctor).
• Attach written instructions to all disability-related equipment.
• Consider using door/window markers so emergency personnel will know your location.
• Contact Safety and Security when you are in buildings after hours.
• Have easy access to emergency contact information at all times.
• Participate in drills and review effectiveness of plan.
• Share individual plans for a building with Safety and Security and key persons who regularly work or live in the building.
Medical Emergencies

Remember to call 911 first. Always check to see if there is someone in the area authorized to deliver Cardio-Pulmonary Resuscitation (CPR). If there is, follow instructions from that person.

To stop bleeding

• Wash your hands well with soap and water, if available.

• Apply pressure directly to the wound with sterile gauze, a clean handkerchief, paper towels, tissues, or with many layers of clean cloth, plastic bags, or the cleanest material available. Use bare hands as a last resort.

• Maintain steady pressure for 5 to 10 minutes.

• Make sure the victim is lying down.

• Elevate the limb if victim is bleeding from an arm or a leg.

• Stay with the victim until help arrives.

Watch for signs of shock (loss of blood pressure)

If victim shows pronounced signs of lightheadedness or confusion, or if breathing is shallow or rapid and the skin is clammy or sweaty, follow these steps:

• Keep the victim lying down and elevate the legs.

• Maintain an open airway. If the victim vomits, turn the head sideways and the chin downward.

• Keep the victim warm.

• Reassure the victim.
Notes:
CPR Procedures

Person not breathing, or not responding (grunting, gasping or snorting)

Before you begin trying resuscitation, you should first ask to see if anyone in your general area is trained in CPR techniques. If so, they should be asked to administer aid to the person in need. If you are unable to find someone, follow these steps:

1. **Call 911 first.** If possible, bring the phone with you when you return to victim. In most locations the emergency dispatcher can assist you with CPR instructions.

2. Place victim on his or her back.

3. If there is no neck injury, tilt the victim’s head back by placing one hand on victim’s forehead and the other under the chin. This will free the tongue to ensure it is not blocking the windpipe.

4. Listen for breathing. If not breathing normally, hold victim’s nose shut. Cover victim’s mouth with your mouth and give 2 breaths of 1.5 to 2 seconds each. You should see the victim’s chest rise.

5. If the victim is still not breathing normally, coughing, or moving, begin chest compressions. Put heel of one hand midway between nipples and put other hand on top of first. Push down on the chest 1.5 to 2 inches 15 times. Pump at the rate of about twice per second.

6. Continue with 2 breaths and 15 pumps until help arrives. If you feel pulse return continue with breaths only.

7. If victim vomits, turn the head to the side and sweep out or wipe off the vomit. Continue CPR.

**Note:** This ratio is the same for one-person and two-person CPR. In two-person CPR the person pumping the chest stops while the other gives mouth-to-mouth breathing.

To register for CPR classes, visit [www.dartmouth.edu/~dartems](http://www.dartmouth.edu/~dartems).
Notes:
CPR for a Baby

If you are alone, read ALL of the following below and do the cycle for one full minute before calling 911, and then continue CPR.

1. Place baby on its back.

2. If there is no neck injury, with hand on forehead and other hand under chin, gently tilt head back to free tongue so as not block windpipe.

3. Cover mouth and nose with your mouth or hold nose shut and blow two times (chest should rise).

4. Put middle two fingers (third and fourth) in middle of chest 1 inch below level of nipples.

5. Press down 5 times about 1/2 inch to 1 inch at a rate of about 2 compressions per second.

6. Repeat 1 breath and 5 chest presses until help arrives.

7. If baby vomits, turn the head to the side and sweep out or wipe off the vomit. Continue with CPR.

If you feel pulse return, continue with breaths only.
Choking

Choking victims cannot speak, breathe, or cough forcefully. Follow these steps for conscious choking victims:

1. Ask the victim if he or she is choking. If the victim cannot speak and uses gestures to indicate choking, begin the Heimlich Maneuver, as outlined below.

2. Get behind the victim and make a fist with one hand. Grasp your fist with the other hand and place your hands slightly above the victim’s navel.

3. Give quick, upward thrusts backwards until the object is expelled or the victim loses consciousness.

Important: For pregnant or obese victims, use a chest thrust. Place your fist on the sternum (breast bone), and thrust backwards repeatedly.

For unconscious choking victims

1. Call 911.

2. Place the victim on his or her back. Open the victim’s airway by placing one hand on the forehead and one hand under the chin and tilting the head back. Check for any obstructions in the mouth or throat.

3. Attempt mouth-to-mouth rescue breathing (see CPR instructions on page 17).

4. If the airway remains blocked, place the heel of your hand slightly below the victim’s ribs. Give six to ten abdominal thrusts.
Notes:
Seizures

Call **911**. Do not try to restrain seizure victims. Remove any objects that could harm the victim and wait for the seizure to end.

**Note:** Do not place anything in a seizure victim’s mouth.
Notes:
Floods

Minor or area flooding on campus could occur as a result of major multiple rainstorms, a water main break, or loss of power to sump pumps. Safety and Security monitors National Weather Service and other emergency advisory systems to be on the alert for imminent, weather-related flooding and will provide instructions should they be necessary.

For imminent or actual flooding

1. Only if you can safely do so:
   - Secure vital equipment, records, and other important papers. Report all hazardous materials (chemical, biological, and/or radioactive to Environmental Health and Safety). Move to higher, safer ground.
   - Shut off all electrical equipment. Secure all laboratory experiments.

2. Do not attempt to drive or walk through flooded areas.

3. Wait for further instructions on immediate action from Safety and Security.

   Do not return to your building if you have been evacuated by flooding until you have been instructed to do so by a College official.

   If you are assisting with flood cleanup, report immediately to Environmental Health and Safety any oil, chemical, or radioactive materials suspected of mixing with flood waters.
Notes:
Earthquakes

Although earthquakes are more common in the western United States, they also occur regularly in the New England area.

• When shaking is felt, get under a desk, table, door arch, or stairwell. If none of these is available, move against an interior wall and cover your head with your arms. Remain under cover until the movement subsides.

• Stay away from large windows, shelving systems, or tall room partitions.

• After the shaking stops, survey your immediate area for trapped or injured persons and ruptured utilities (water, gas, etc.).

• If minor damage has occurred in your area, inform Safety and Security immediately. Remain at your station and await further instructions from College personnel.
Tornadoes

If the National Weather Service issues a “tornado watch,” it means that tornadoes could potentially develop. A “tornado warning” means a tornado has actually been sighted. If you see a tornado, report it immediately by calling 911.

Seek shelter or safety

• Go to a basement, underground excavation, or lower floor of interior hallway or corridor (preferably a steel-framed or reinforced concrete building).

• Seek shelter under a sturdy workbench or heavy furniture if no basement is available.

• Move away from the path of the tornado at a right angle in open country.

• Lie flat in the nearest depression, ditch, or ravine if there is no time to escape.

Avoid

• Top floors of buildings.

• Areas with glass windows or doors.

• Auditoriums, gymnasiums, cafeterias, or other areas with large, free-span roofs.

• Cars—do not wait out the storm in a car. Cars are not safe in tornadoes.

Listen

• For reports and siren/public address announcements.
Notes:
Power Outages

Dartmouth has procedures within Facilities Operations and Management for dealing with power outages and resumption of power after an outage. The office also maintains emergency generators. Providing backup power and resumption of power after an outage will be overseen by Facilities Operations and Management. Follow these directions in the event of an outage:

1. Remain calm.
3. Follow instructions from Safety and Security.
4. If you must evacuate a building, follow the instructions in this guide on evacuation. Seek out those with special needs and provide assistance.
5. Do not light candles or use other kinds of flames for lighting.
6. Unplug all electrical equipment (including computers) and turn off light switches.

Laboratory personnel

1. Secure all experiments, unplug electrical equipment, and shut off research gases prior to evacuating.
2. Close all fume hoods and chemical containers.

Elevators

1. If passengers are trapped in an elevator, advise them to stay calm and tell them you are getting help.
2. Call Safety and Security for assistance.
3. Stay near the passengers until police or other assistance arrives, if it is safe for you to stay in the building.
4. If you are trapped in an elevator, try to remain calm. Help will be there soon.

Important Numbers

Always call 911 to report emergencies

Safety and Security
(603) 646-4000

Environmental Health and Safety
(603) 646-1762

Facilities Operations and Management
(603) 646-2485

Health Service (Dick’s House)
(603) 646-9400

Dartmouth-Hitchcock Medical Center, Emergencies
(603) 650-7000

Public Affairs office:
(603) 646-3661
pager:
(603) 643-0816
Bomb Threats

Try to remain calm and on the line if you receive a telephone bomb threat. If possible, ask another person to listen on another extension. Take notes on the caller’s threat, tone, voice characteristics, and background noise.

1. If the caller seems talkative, ask the following questions using the checklist on the next page of this guide (extra copies are included). Write down the answers, if possible.

   • When will the bomb go off? How much time remains?
   • Where is the bomb located?
   • What does it look like?
   • What kind of bomb is it?
   • How do you know about this bomb?
   • What is your name?
   • Do you know there are PEOPLE in the building who could be hurt or killed?

2. Call 911 immediately, or have someone else call, and submit your notes from the telephone call to authorities.

3. Follow police instructions.

4. Check your work area for unfamiliar items. Do not touch suspicious items. Report them to campus authorities.

5. Take personal belongings with you when you leave your office or residence hall.

6. Do not turn light switches on or off.

7. Use stairs only; do not use elevators.

8. If you have evacuated a building that has been threatened, move well away from it and follow instructions from emergency responders.
Bomb Threat Telephone Checklist

Try to notice if there is a telephone number on display and write it down here ______________

Time received _______________ Date _____________________

Received by ___________________ Position/title _______________________

Phone number _______________________

Try to notice the following characteristics of the caller’s voice:

Calm
Loud
Nasal
Angry
Laughter
Stutter
Laughter
Excited
Crying
Lisp
Slow
Normal
Raspy
Rapid
Distinct
Deep
Soft
Slurred
Ragged
Accent
Clearing throat
Familiar
Breathy

If the voice is a familiar one, who does it sound like?

___________________________

Gender of caller:
Male _____ Female _______

Approximate Age _______

Threat language: Listen for the following. Does the speaker sound:

• Well-spoken or well-educated?
• Incoherent?
• Irrational?
• Foul?
• Is the message being read by the person making the threat?
• Does the message sound as though it’s been taped?

Try to listen for and report, if possible, the following background sounds:

Street noise
Factory machines
Voices
PA system
Music
House noise
Motor

Office machinery
Animal sounds
Kitchen noises
Clear
Static
Other

Important numbers
Always call 911 to report emergencies before calling these numbers.

<table>
<thead>
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- Calm
- Loud
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- Excited
- Crying
- Lisp
- Slow
- Normal
- Raspy
- Rapid
- Distinct
- Deep
- Soft
- Slurred
- Ragged
- Accent
- Clearing throat
- Familiar
- Breathy

If the voice is a familiar one, who does it sound like?

- Disguised
- Cracking voice

Gender of caller:
- Male _____ Female _____

Approximate Age _____

Try to listen for and report, if possible, the following background sounds:

- Street noise
- Factory machines
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Suspicious Packages and Objects

Remember
If you have any reason to believe that a letter or parcel is suspicious, don’t take a chance or worry about potential embarrassment. Call Safety and Security immediately at (603) 646-4000.

Three rules
1. Do not touch the package or object.
2. Do not tamper with it.
3. Do not attempt to move it.

Other tips
• Do not try to open the package or letter.
• Isolate the object and evacuate the immediate area.
• Do not put the object in water or in a confined space such as a desk drawer or filing cabinet.
• If possible, open windows in the immediate area.

Characteristics of suspicious packages and objects
• Special deliveries, foreign mail, or air mail
• Restrictive markings, such as “confidential” or “personal”
• Excessive postage
• Handwritten or poorly typed address
• Incorrect titles
• Misspelling of common words
• Oily stains or discolorations on package
• Excessive weight
• Rigid, lopsided, or uneven envelopes
• Protruding wires or tinfoil
• Excessive tape or string
• Visual distractions such as illustrations
• No return address

Important Numbers

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Facilities Operations and Management
(603) 646-2485

Health Service (Dick’s House)
(603) 646-9400

Dartmouth-Hitchcock Medical Center, Emergencies
(603) 650-7000

Public Affairs office:
(603) 646-3661
pager:
(603) 643-0816
Notes:
Threatening or Violent Behavior

Threats may be statements of intention or expressions of strong emotion. They can be indirect or direct, verbal or non-verbal. It is important to treat any threat or display of hate as potentially serious and to report instances to authorities if you feel endangered.

Steps to Follow
If the threat is immediate, leave the situation if possible and call 911.

For an angry or hostile customer or co-worker:
• Stay calm.
• Listen attentively.
• Maintain eye contact.
• Be courteous. Be patient. Be respectful.
• Keep the situation in your control.
• Signal to a co-worker or supervisor that you need help (have a prearranged code or alarm system).
• Do not make any calls yourself.
• Have someone call 911.

If someone is threatening you with a gun, knife, or other weapon:
• Stay calm and quietly signal for help.
• Maintain eye contact.
• Stall for time.
• Keep talking, but follow instructions from the person who has the weapon.
• Never try to grab the weapon.
• Watch for a possible chance to escape to a safe area.

If the threat isn’t immediate, consult appropriate resources for help in assessing the level of danger, determining an appropriate intervention, and choosing appropriate safety measures.
Communicating in a Crisis

The College’s Emergency Management Group (EMG) handles crises and provides guidance on communications and other matters. Your supervisor can contact the EMG in the event of a crisis, which will begin the College’s formal emergency management process.

That process includes notifying Public Affairs, which is responsible for crisis communications. Feel free to call Public Affairs at any time at (603) 646-3661 if you have questions.

These campus resources are meant to take the communications burden off your shoulders so you can keep yourself safe and do what you can to attend to the emergency situation.

Institutional notification procedures

1. Report all crisis situations to your supervisor as quickly as possible.

2. The EMG automatically notifies the necessary offices in the event of an emergency. The senior officer in your department can invoke these procedures.

Dealing with the media

• Crisis situations are of intense interest to the media. Don’t be surprised if you see reporters.

• Speaking with reporters during an emergency can be counterproductive. You should consult with your supervisor before speaking to the press in an emergency situation. Always remember that you are under no obligation to speak with reporters, no matter how insistent they are.

• Public Affairs (603-646-3661) is your resource for dealing with reporters. It is staffed around the clock. After hours and on weekends call (603) 643-0816 to page the staffer on call.

• Concentrate on keeping yourself and others safe. Leave communications to the EMG and Public Affairs.

Important Numbers

Always call 911 to report emergencies

Safety and Security
(603) 646-4000

Environmental Health and Safety
(603) 646-1762

Facilities Operations and Management
(603) 646-2485

Health Service (Dick’s House)
(603) 646-9400

Dartmouth-Hitchcock Medical Center, Emergencies
(603) 650-7000

Public Affairs office:
(603) 646-3661
pager:
(603) 643-0816
Notes:
Important Numbers

Always call 911 to report emergencies before calling these numbers

Safety and Security (Public Safety)  
(603) 646-4000

Environmental Health and Safety (Biological, Chemical and Radiological Emergencies)  
(603) 646-1762

Facilities, Operations and Management  
(603) 646-2485

Health Service  
(Dick’s House—Student Health Services)  
(603) 646-9400

Dartmouth-Hitchcock Medical Center, Emergencies  
(603) 650-7000

Public Affairs  
office: (603) 646-3661  
pager: (603) 643-0816