



Disaster Nursing

Coping with the Infamous Topeka, Kansas, Tornado of 1966

BY GENEVIÈVE M. CLAVREUL, RN, PHD

AS I SIT HERE WRITING THIS MONTH'S column I keep an attentive ear tuned to the constant drone of news. The reports are calamitous: almost 60 tornadoes, seemingly endless rain, and towns and cities dealing with what is being called 100- or 500-year floods. I worry about my family and friends still living in Kansas, as well as my son, who is one of hundreds of first responders assisting in res-

cue and providing emergency care to the devastated communities outside of Topeka. Be a nurse long enough and you'll experience your fair share of catastrophes. When you think that the one you are mired in is the worst you will ever experience, that nothing can ever shock you again—just wait. The next natural disaster will remind you of the fickle hand of Mother Nature.

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My first taste of the reliance a community places on its first responders was the infamous Topeka Tornado in June, 1966. Though this disaster occurred over 40 years ago, its memory is still clearly etched in the minds of my family. I was nearly seven months pregnant with my fourth child, and had just returned from a shift at the hospital as a tornado watch hung over our city.

We had been living in Topeka for some time, so preparing for a tornado had become old hat for our family. During the watch: Get organized, keep an eye on the sky, and listen for the warning sirens. Once the warning comes, it's time to drag loved ones, pets and stuffed animals down into the basement or storm shelter, hunker down and hope that the tornado leaves your home, better yet your town, somewhat unscathed.

During this particular drill, my husband was stationed in Bangkok, so it was my mother and I who prepared our brood for the very real possibility of having to take shelter. Then in the blink of an eye the claxons sounded and we made our mad dash into the basement. My daughters (six and five at the time) still vividly remember those few moments when Topeka was nearly leveled by a category F5 tornado that to this day ranks as one of the costliest to ever hit the United States.

ONCE THE TORNADO HAD PASSED and it was safe to leave the shelter, I had to return to work since our hospital would be on emergency alert. I can still recall the feeling of controlled chaos that emanated from every nook and cranny of our nursing stations, and how our hallways quickly became lined with gurneys, cots, chairs—anything that would hold one of the more than 500 people who were injured in the disaster.

I also remember how the nurses huddled together those first few hours after the devastation, checking to make sure that our coworkers were not among the injured, or worse yet, dead, and then realizing that in a perverse twist of fate many of our lives had been spared due to the time the tornado struck. It hit our town around 7 PM, when most of us had changed shifts. If it had been any earlier, many of us may have been sent to the Civil Defense building, the hub of our emergency center for the city at the time, which had been leveled by the tornado.

The days that followed this disaster tested the strength of every hospital's medical and nursing staff, but during this time period, I never remember any nurse, doctor, or hospital administrator who didn't put aside their needs for those in our community. Many of us didn't go home for nearly a week, eating, changing, sleeping, and living at the hospital as we cared for the injured. Little attention was paid to whether or not the hospital had "beds." Instead, we made makeshift rooms out of the hallways, fashioning privacy curtains out of hospital linens and beds out of gurneys.

Many of our residents were trapped in homes and buildings without power, and were unable to be transported to local hospitals due to the dangerous road conditions. Somehow our creative nursing team was able to find ways to replace tire after tire, leaving us feeling like we were members of a pit crew. Our streets were so debris-strewn that tires were still going flat from punctures months later.

All in all when you consider the ferocity of the tornado (an F5 is in the Incredible Tornado Category, just below F6+, which is the Inconceivable Tornado Category, the very worst), the death toll was small, with an estimated 16 dead. However, it was the injured who swamped the hospital and the staff. I remember the number of volunteer nurses and physicians who appeared and just seemed to blend into our existing teams. Though each of our hospitals had an emergency plan and someone charged with implementing it, you never really knew how it would work together until, as they say, the rubber hits the road.

MANY OF OUR FELLOW RNS are hard at work right now, doing what they do best—reaching out and caring for those in need, often placing themselves and their families' needs second to those of the community. It is with pride that I recall these times, knowing these are the moments that nurses across counties, states, and the nation come together and lift one another up so we can do what it takes to help the greater good.

I'm not sure how our response to the 1966 Topeka tornado would have measured up in today's environment of heightened awareness, immediate news reporting, and in some cases excessive fault-finding. What I do know is that we survived the tornado, its aftermath, and that the city is still thriving.



I did learn some valuable lessons though in that harrowing week, month, or was it a year? They were:

- **A MIND OF THEIR OWN.** Even though legend has it that the natural mound-like formation outside of town is said to protect your community from tornados, remember that they have a will of their own and will do what they darn well please.
- **REDUNDANCY IS A GOOD THING.** It's great to have an organized Civil Defense building with a corresponding city-wide emergency action plan, but it's even better to have a well-organized workplace emergency plan. If your Civil Defense center gets flattened by a tornado (or other calamity), you can count on your workplace training and practice runs to help you survive the chaos.
- **WE CAN ALL PITCH IN.** Everyone, even nursing students who are months away from graduation and even further away from licensure, can contribute to the emergency plan. We all play an integral role in relieving other members of the nursing team and helping treat the mass casualties that such a disaster brings.
- **JUST GET THROUGH.** No matter how well planned, practiced, or prepared you think you are, sometimes Mother Nature or Fate has other plans for you. When that happens, all you can do is focus on the now, remember the basics, and look to your teammates because you're all in the same boat.

Most importantly, remember: "This too shall pass." **WW**



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