## Flood Disaster Shows Need for Backup Systems

BY JENNIFER SILVERMAN AND JOYCE FRIEDEN Associate Editors, Practice Trends

he recent disaster in New Orleans may be a wake-up call for all physicians to establish some kind of emergency backup system for their businesses.

"Physicians don't always think of themselves as running a business, but they're going to think of it now," Rosemarie Nelson, a Syracuse, N.Y.–based consultant with the Medical Group Management Association, said in an interview.

Otolaryngologist Michael Ellis, M.D., hopes that technology might have retained some of his records. His practice in Chalmette, La., south of New Orleans, is in an area flooded to the rooftops in the aftermath of Hurricane Katrina and the subsequent breakdown of New Orleans' levees.

"Like most physicians, I have billing electronic records, but my office clinical records are paper. I assume all that—and our supplies and equipment—will be unsalvageable," he said in an interview shortly following the flood.

Dr. Ellis said that he had backups in place for his billing records, both hard copy and "off campus," (outside computer services) assuming that certain computers weren't damaged or backed up during the flood.

As Ms. Nelson noted, "there is just no way to secure paper records. They're there or they're not. You're not going to copy and store them off-site."

However, a fully integrated electronic medical record might not have been completely safe for stricken medical communities, either.

Anne L. Shirley, a spokeswoman with the Louisiana State Medical Society, said

an undetermined number of records have been destroyed.

Some electronic records weren't able to be accessed as most computer servers have been destroyed, Ms. Shirley said. The Louisiana State Board of Medical Examiners is located in a hard-hit flood area in New Orleans, and the society's Web site and database were inoperable, even from remote locations, Ms. Shirley said. "This, as you can imagine, poses a problem with license verification and credentialing for displaced physicians."

One way to solve backup problems such as these is to have electronic medical records stored in a secure, remote site by a vendor, Ms. Nelson said. "And, it does not have to be a vendor you bought your software from; there are tons of vendors out there providing remote access."

Such vendors also can offer Internetbased backups, which "add a whole new sense of security," she noted. "When something happens in an area or region, that [backup disk] you took home is as insecure as your records."

Even if they don't use an electronic medical record system (and only about 15% of doctors have them), physicians should consider storing their administrative records, such as financial and scheduling information off-site, Ms. Nelson said.

"You need to think about using off-site backup for your financial applications, scheduling, patient list, and some receivables. You still have insurance receivables there, and you're going to need that cash inflow because you're going to have to buy new equipment. So securing your financial records is equally as important." The patient list will be essential when you need to inform patients that you've set up

your practice in a new location or will be reopening on a particular date, she added.

An advantage of backing up financial information is that it also includes some clinical information, Ms. Nelson said. "That's because you need to have a diagnosis code to bill the insurance company."

At press time, Dr. Ellis was able to communicate only by e-mail because all the phone prefixes in Louisiana and Mississippi were unreachable.

He could reach his practice associate in

## **FEMA Floodproofing Tips**

Here are some general tips from the Federal Emergency Management Agency on flood and hurricane preparation for businesses:

► Ask your local emergency management office whether your facility is located in a flood plain. Find out the history of flooding in your area. Determine the elevation of your facili-

ty in relation to streams, rivers, and dams.

► Learn about community evacuation plans from your local emergency management office.

► Establish facility shutdown procedures. Make plans for assisting employees who may need transportation.

 Purchase a National Oceanic and Atmospheric Administration weather radio with a warning alarm tone and battery backup. Listen for flood watches and warnings.

► Get information about flood insurance from your insurance carrier. Regular property and casualty insurance does not cover flooding. Birmingham via e-mail. "Two of my staff communicated that they are in upper Mississippi," he said. Other physicians emailed from Houston and Baton Rouge to let him know their whereabouts.

At press time, the Louisiana State Medical Society was working with the state's Department of Health and Hospitals, the Office of Emergency Preparedness, the Department of Homeland Security, and the Federal Emergency Management Agency to contact physicians.

If a hurricane or another kind of major weather event is being forecast, consider taking these actions ahead of time:

► Clear out areas with extensive glass frontage as much as possible. If you have shutters, use them; otherwise, use precut plywood to board up doors and windows.

► Remove outdoor hanging signs.

▶ Bring inside or secure any objects that might become airborne and cause damage in strong winds.

► Store as much equipment as high as possible off the floor, especially goods that could be in short supply after the storm.

► Move equipment that cannot be stored away from glass and cover it with tarpaulins or heavy plastic.

► Place sandbags in spaces where water could enter.

► Remove papers from lower drawers of desks and file cabinets and place them in plastic bags or containers on top of the cabinets.

## How to Volunteer

The federal government is seeking volunteers from the health care and relief professions listed below to deploy to the Gulf region. Deployment may last 14 days or longer and may include 12-hour shifts under austere conditions, according to the Health and Human Services department.

Volunteers will be unpaid, but will receive travel reimbursement, a per diem, and coverage under the Federal Tort Claims Act for liability coverage and workman's compensation, HHS said in a statement. To volunteer, visit https://volunteer.ccrf.hhs.gov or call 866-528-6334.

Administration/finance officers Chaplains Clinical physicians Coroners Dental forensics Dentists Dieticians EMTs Environmental health Epidemiologists Facility managers Housekeepers IT/communications officers Laboratory technicians Licensed practical nurses Medical clerks Medical examiners Medical record/health information managers Mental health workers Morticians Mortuary assistants Nursing assistants/nursing support technicians Nursing staff directors Paramedics Patient transporters/volunteers Pharmacists Psychologists Physician's assistants or nurse-practitioners Physician chiefs of staff Radiologic technicians Respiratory therapists Registered nurses Safety officers Security officers Social workers Substance abuse counselors Supply managers Veterinarians

## Medical Schools' Alternative Locations

Medical schools affected by Hurricane Katrina and its aftermath scrambled to find alternative locations and resources, to ensure that their students and residents would be able to continue practicing medicine.

At press time, most of the students from Tulane University in New Orleans were being housed 180 miles away at Jackson State University in Jackson, Miss. Tulane leadership had set up temporary headquarters in Jackson with the assistance of the University of Mississippi Medical Center.

Paul K. Whelton, M.D., senior vice president for health sciences at Tulane, said the university would establish a more permanent "interim leadership headquarters" in Houston.

"Senior administrative staff are in discussion with their counterparts at Houston-area medical schools about these schools assisting Tulane in continuing to provide medical education for Tulane students in all 4 years of medical education," the Association of American Medical Colleges reported. A similar plan was being developed for Tulane residents. In the meantime, the School of Medicine at Louisiana State University, New Orleans, made arrangements to hold classes in Baton Rouge until its facilities were once again suitable for occupation.

"We are closely working with the LSU System Office to arrange appropriate classroom space and accommodations for our students and faculty," Dean Larry Hollier, M.D., said in a statement.

Charity Hospital in New Orleans will be out of service for an extended period of time, as the city begins a major clean up effort, he said. "We will be expending our bed capacity at Earl K. Long Medical Center [in Baton Rouge], and at University Medical Center in Lafayette ... and reassigning our residency staff to those hospitals as well as to some other private hospitals."

He noted that the university had an online registration available on its Web site at www.lsuhsc.edu.

The University of South Alabama in Mobile reopened in early September, the AAMC reported.