time of presenting complaints. Ethics approval was granted by Columbia University.

Results: Data was collected for a two-week period approximately three weeks after the hurricane made landfall. The FMS saw 2,154 patients over a 14-day period. The population of patients (median age = 43 years [IQR 39 years]) assessed was bimodal in distribution, with one peak in children at 1 year. A second peak occurred at age 53 years. 60.2% of presenting complaints were infection- or chronic disease-related. Musculoskeletal complaints were the third most common. Chi-squared tests revealed no statistically significant change in the frequency of specific types of complaints between the start and end of data collection.

Discussion: In the weeks after Hurricane Maria, infants and elderly were seen to predominantly seek medical care. Likely related to the collapse of the healthcare infrastructure, there was a high prevalence of infection-related and chronic medical conditions. The data support the need to focus resources to treat vulnerable populations, infectious issues, and chronic medical conditions.

Description of Disaster Forms Usage in Health Cluster in Lombok and Palu Earthquake

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Introduction: The effort of medical and health services distribution requires data. However, the data and information were ignored in an emergency situation. For improving the distribution of data and information, the Center of Health Policy and Management, Faculty of Medicine, Public Health, and Nursing Universitas Gadjah Mada (UGM) developed forms based on Health Crisis Response Guideline by Ministry of Health 2016 and the World Health Organization (WHO).

Aim: Describing the implementation and development of forms based on Lombok and Central Sulawesi earthquake in 2018 for health cluster.

Methods: The form contains (1) a volunteer registration form; (2) a monitoring potential outbreak disease form; (3) health problem in health cluster daily report form; (4) a chronological situation form. This will be implemented in health policy-making by the Sulawesi district health office (DHO) and will be regularly analyzed in every week.

Results: North Lombok DHO, Central Sulawesi health office, and volunteers accepted these forms well. Periodically volunteers had reported their activity to DHO. All these reports contain many health indicators including environmental health. Reproductive health and health promotion. Implementation of this form in the other type of disaster in Indonesia is suggested.

Discussion: First, these forms are important to attach to the guideline of health crisis response in order to be accessed by all DHO. Second, all forms are printed documents. It needs to develop into data input and analysis applications.

Deuce and a Half with a Twist: Repurposing Old Technology to Save Lives in Swiftwater Rescue during Urban and Small Stream Flash Flooding

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Introduction: Vehicles stranded in rising water account for the majority of swiftwater rescues (SWR) during urban and small stream flash flooding. Multiple simultaneous SWR incidents are commonplace during severe storms. Historically, SWR teams have pursued a "reach, throw, row, go" strategy. However, reach and throw attempts are usually futile. Boat operations and/or in-water rescue attempts can be technically complicated, time-consuming, and a drain on rescuer resources.

Aim: To design an ideal SWR modality for use during urban and small stream roadway flooding.

Methods: SWR objectives, strategy, and tactics were mapped against various transportation modalities to develop the safest solution for urban and small stream flood response.

Results: High water vehicles (HWV), such as the "deuce and a half" 6×6 military truck, represent a new standard for SWR practicality and safety as they can reduce rescuer time in-water. HWVs are heavy and high enough to be stable on roadways in most flash flooding conditions. A properly designed emergency response package includes a fording kit, multi-directional floodlights for nighttime operations, public safety radios, and a siren that doubles as a public address system to coach victims as a rescue is initiated. Deployable ladders enable rescuer egress from and victim access to a covered lighted cargo bed that holds PPE, throw bags, and rescue rings; a deployable "boat in a bag" for victims who require ferrying; and a heated seating area where medical evaluation can be conducted while staying dry.

Discussion: SWRs are dangerous resource-intensive incidents which account for more rescuer morbidity/mortality than all other technical rescue sub-types combined. These incidents will increase in frequency and severity worldwide due to climate change and overdevelopment. If rescue conditions are still tenable, HWVs are the most efficient and effective platform for conducting SWR from flooded roadways while decreasing safety risks to first responders and victims.

Developing a Knowledge Program for Large Scale Prehospital Assistance During Disasters and Big Incidents

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Introduction: In the Netherlands, we started in 2016 with a new procedure for large scale medical assistance during a crisis. The normal daily assistance in the Netherlands is organized on a regional level, and we have 25 regions. These regions are far too small to handle big incidents, and cooperation is needed on a