A CASE STUDY REPORT:

PULSE NIGHTCLUB SHOOTING

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## INTRODUCTION

- On the morning of June 12, 2016, an armed assailant entered the Pulse Nightclub in Orlando, Florida, and initiated an assault that killed 49 people and injured 53.<sup>[1]</sup>
- The shooting was one of the deadliest mass shootings by a single gunman in U.S history.



## FACTS OF THE CASE

- Just after 2:00 AM on June 12, 2016, more than 300 people were inside the club when the perpetrator opened fire near the entrance.<sup>[2]</sup>
- Almost immediately, an off-duty Orlando police officer who had been working as a security guard at Pulse engaged in a gun battle with the shooter before withdrawing in the face of superior firepower.<sup>[2]</sup>
- The office requested assistance, and, within minutes, additional police and emergency personnel arrived on the scene and began carrying victims triage centre across the street.<sup>[2]</sup>

## FACTS OF THE CASE

- A group of police officers, several of whom had Special Weapons and Tactics (SWAT) training, entered the club through a broken window and exchanged fire with the shooter.<sup>[2]</sup>
- At this point, roughly 10 minutes had passed since the beginning of the shooting rampage, and while many patrons had been able to escape, dozens were either dead, wounded, or trapped inside the club.<sup>[2]</sup> At 2:35 AM the shooter placed a call to 911, at which point he professed his "allegiance to Abu Bakr al-Baghdadi of the Islamic State.<sup>[2]</sup>"
- Police reported that they had hemmed in the shooter in the bathroom area, and the posture of the law-enforcement response shifted from an active shooter engagement to a hostage situation.<sup>[2]</sup>

  Over the next hour, the shooter spoke with negotiators three times, staying on the phone for a total of 28 minutes, while many gravely wounded victims remained inaccessible to rescue personnel.<sup>[2]</sup>



## FACTS OF THE CASE

- At 4:21 AM police officers and trapped patrons succeeded in removing an air-conditioning unit from the exterior wall of one of the club's dressing rooms, enabling a handful of survivors to flee to safety.<sup>[2]</sup>
- Those who escaped told police that the shooter was planning to place bomb vests on four hostages within the next 15 minutes, and SWAT and hazardous device teams prepared to breach the wall of the building with explosives.<sup>[2]</sup>
- At 5:02 AM the Orlando police triggered the first of several controlled detonations before smashing through the wall of the club with an armored vehicle.<sup>[2]</sup> Hostages poured out of the building, and the shooter was killed after engaging almost a dozen police officers in a gun battle.<sup>[2]</sup>



## MANAGEMENT OF THE EVENT

- Orlando Regional Medical Center, the regional Level I trauma center in Central Florida and located three blocks from the Pulse Nightclub, was the primary hospital responding to this mass casualty event. [1]
- Less critically injured patients were taken to one of two local community hospitals.<sup>[1]</sup> The first wave of 36 victims was transported to the Level I trauma center within the first hour of injury. The second wave of 26 victims was transported to one of the three hospitals following the resolution of the hostage situation.<sup>[1]</sup>.
- A third wave of 40 victims trapped within the nightclub, widely anticipated by law enforcement to arrive for care by the three hospitals, never materialized as all of these victims had succumbed to their injuries.<sup>[1]</sup> A retrospective review was performed of all known victims injured in the Pulse Nightclub shooting who either presented to one of three Orlando hospitals for treatment or died following the event. Autopsy reports for all victims who succumbed to their injuries were obtained from the District Nine Medical Examiner's Office.<sup>[1]</sup>



## MANAGEMENT OF THE EVENT

- The proximity of the Pulse Nightclub to the Level I trauma center, as well as the location of the two community hospitals, positively impacted patient survival. Patients in hemorrhagic shock were able to receive rapid hemorrhage control due to earlier presentation to definitive care. [1] As the number of victims from this mass casualty incident became clear, the surge capabilities of each hospital were implemented. [1]
- At the Level I trauma center, operating room staff from the adjacent pediatric Level I trauma center and women's hospital were brought to Orlando Regional Medical Center to rapidly staff additional operating rooms. [1] From my experience as an Emergency Room Nurse, the response seemed appropriate. Law enforcement assessed the need for medical personnel as there was a possible uptick in severe injuries. The information was relayed to the proper authorities in hospital leadership so they can prepare staff, operating rooms and gather necessary equipment. Staff floated from different disciplines in preparation for critical patients after initial triage by on-site personnel.



#### EPIDEMIOLOGICAL ASPECTS OF THE EVENT

• There are not many epidemiological aspects of this mass shooting. After reviewing information about the case, it would seem very unlikely that there are major biases or threats to validity. Missing data was collected by conducting interviews, video surveillance, and the obtainment of medical records.

## COMMUNICATIONS OF THE EVENT

• Communication between law enforcement and all other stakeholders such as the victims and the Orlando hospital system seems to be adequate. As soon as a threat was noticed, an off-duty officer tried to combat the situation and notify others for further assistance. Unfortunately, the injuries to the victims were very severe, however, hospitals were ready and anticipated an influx of new patients. After the tragedy, U.S. Pres. Barack Obama and Vice Pres. Joe Biden met with survivors and the families of victims in Orlando and Obama renewed his call for a legislative response to gun violence.<sup>[2]</sup>



# SUMMARY/TAKEAWAYS

- Mass shootings are a major issue in the U.S and with influences from the NRA and other special
  interest groups, effective legislation has not been passed to fully address this issue. Hospital
  systems in population-dense areas have action plans in place for such emergencies, however,
  there needs to be a stoppage "upstream" to mitigate the risk of a mass shooting.
- With the information law enforcement had, they acted appropriately and as timely as possible. Gun
  manufacturers need to be held accountable with civil lawsuits and practice changes to ensure the
  safety of the public. Ammunition capacity and lock mechanism should be implemented on newly
  manufactures guns to allow law enforcement and others to have the ability to deter a heinous
  event like this from happening again.

#### REFERENCES

- [1] Smith, C. P., Cheatham, M. L., Safcsak, K., Emrani, H., Ibrahim, J. A., Gregg, M., ... & Levy, M. S. (2020). Injury characteristics of the Pulse Nightclub shooting: lessons for mass casualty incident preparation. *Journal of trauma and acute care surgery*, 88(3), 372-378
- [2] Ray, M. (2022, June 5). Orlando shooting of 2016. Encyclopedia Britannica. https://www.britannica.com/event/Orlando-shooting-of-2016