

MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

Medical Incident Report

FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.

FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.

Use the following items to communicate situation to communications/dispatch.

1. CONTACT COMMUNICATIONS / DISPATCH (Verify correct frequency prior to starting report)

Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."

2. INCIDENT STATUS: Provide incident summary (including number of patients) and command structure.

Ex: "Communications, I have a Red priority patient, unconscious, struck by a falling tree. Requesting air ambulance to Forest Road 1 at (Lat./Long.) This will be the Trout Meadow Medical, IC is TFLD Jones. EMT Smith is providing medical care."

Severity of Emergency / Transport Priority	<input type="checkbox"/> RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2° – 3° burns more than 4 palm sizes, heat stroke, disoriented.</i> <input type="checkbox"/> YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary. <i>Ex: Significant trauma, unable to walk, 2° – 3° burns not more than 1-3 palm sizes.</i> <input type="checkbox"/> GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport <i>Ex: Sprains, strains, minor heat-related illness.</i>				
Nature of Injury or Illness & Mechanism of Injury		Brief Summary of Injury or Illness <i>(Ex: Unconscious, Struck by Falling Tree)</i>			
Transport Request		Air Ambulance / Short Haul / Hoist Ground Ambulance / Other			
Patient Location		Descriptive Location & Lat./Long. (WGS84)			
Incident Name		Geographic Name + "Medical" <i>(Ex: Trout Meadow Medical)</i>			
On-Scene Incident Commander		Name of on-scene IC of Incident within an Incident <i>(Ex: TFLD Jones)</i>			
Patient Care		Name of Care Provider <i>(Ex: EMT Smith)</i>			
3. INITIAL PATIENT ASSESSMENT: Complete this section for each patient as applicable (start with the most severe patient) Patient Assessment: See IRPG PAGE 106		VITAL SIGNS Age _____ Weight _____ Level of Consciousness: Alert and Oriented to: Person Place Time Event Responsive to: Verbal Stimulus Pain Stimulus Unresponsive Breathing: Not Normal Difficult/Labored Rate _____ Pulse Rate: Absent Present: _____/minute Skin Color: Normal Pale Bluish Red Skin Moisture: Normal Dry Moist Profuse Sweating Skin/Body Temp: _____°F Normal Hot Cold Cool Pupils: Equal and Reactive Unequal Dilated Constricted Blood Pressure: SYS _____/DIA _____ Oxygen Saturation with Pulse Oximeter (SaO2): _____ Blood Glucose Level: _____			
Treatment:					
4. TRANSPORT PLAN: Evacuation Location (if different): (Descriptive Location (drop point, intersection, etc.) or Lat./Long.) Patient's ETA to Evacuation Location:					
Helispot / Extraction Site Size and Hazards:					
5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS: Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication					
6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable					
Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *
COMMAND					
AIR-TO-GRND					
TACTICAL					
7. CONTINGENCY: <u>Considerations:</u> If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead.					
8. ADDITIONAL INFORMATION: Updates/Changes, etc.					

REMEMBER: Confirm ETAs of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.