

Initial MCI Report	Receiving Facility Report	Base Hospital Report or Consultation
<ol style="list-style-type: none"> 1. Confirm or cancel the MCI Alert 2. Location of incident 3. Name of incident, e.g. Blackjack Incident 4. MCI position title, e.g. Blackjack Transportation 5. Classify incident: <ol style="list-style-type: none"> a. Trauma b. Medical c. Hazmat 6. Approximate number of patients 7. Estimated time triage will be complete 	<ol style="list-style-type: none"> 1. Unit ID 2. Trauma, MCI, Cardiac or Stroke Alert, if indicated 3. Name of crewmember making report 4. Transport Code 2 or 3 5. Age, sex, weight(s) 6. Chief complaint 7. History of Incident/Mechanism of Injury 8. Trauma Triage Criteria met (if applicable) 9. Pertinent medical history 10. Pertinent medications 11. Vital signs to include: BP, pulse, respirations, pulse oximetry 12. LOC 13. Treatment rendered 14. Interventions: <ol style="list-style-type: none"> a. BLS Treatment rendered and patient response. b. ALS Standing Orders implemented and patient response. 15. ETA 	<ol style="list-style-type: none"> 1. Unit ID 2. Trauma, MCI, Cardiac or Stroke Alert, if indicated 3. Crewmember name making report 4. Transport Code 2 or 3 5. Age, Sex, Weight 6. Chief Complaint 7. History of Incident/Mechanism of Injury 8. Trauma Triage Criteria met 9. Patient Condition (e.g. "stable") 10. Vital Signs to include: BP, pulse, respirations, pulse oximetry and GCS (best eye, motor and verbal) 11. Interventions: <ol style="list-style-type: none"> a. BLS Treatment rendered and patient response. b. ALS Standing Orders implemented and patient response. 12. Primary survey (LOC, skin signs) 13. Secondary Physical Exam 14. Past medical history/PMD 15. Medications/allergies 16. Request for consultation/orders needed 17. ETA
Second MCI Report		
<ol style="list-style-type: none"> 8. Total number of patients and their triage categories: <ol style="list-style-type: none"> a. Immediate <ol style="list-style-type: none"> i Head ii Chest iii Abdomen b. Delayed c. Minor 9. Number of ground and air transport units available 		
May Receive Prehospital Report: MICN or Physician ONLY!	May Receive Prehospital Report: Any Medical Personnel	May Receive Prehospital Report: MICN or Physician ONLY!

Effective: 3-1-08
 Revised:
 Supersedes:

Approved: Signature of File
 Medical Director

Signature of File
 EMS Administrator