

Initial MCI Report	Advisory Report to a Receiving Hospital	Base Hospital Report/ALS Consultation Report
<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 Medical Group Supervisor. 5. Incident Type: <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. Name and level (EMT or paramedic) of person making report. 3. Trauma, MCI, STEMI or Stroke Alert, if indicated. 4. Transport Code 2 or 3. 5. Patient age, gender, weight(s). 6. Chief complaint. 7. History of incident. 8. Trauma Triage Criteria met (if applicable). 9. Pertinent medical history. 10. Pertinent medications. 	<ol style="list-style-type: none"> 1. Unit ID. 2. Name and level (EMT or paramedic) of person seeking orders. 3. <u>Request for consultation/orders needed (State reason for calling)</u> 4. Trauma, MCI, STEMI or Stroke Alert, if indicated 5. Transport Code 2 or 3. 6. Patient age, gender, weight. 7. Chief Complaint. 8. History of incident. 9. Trauma Triage Criteria met (if applicable).
<p>Second MCI Report</p> <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"> 1) Adult. 2) Pediatric. b. Delayed. c. Minor. <p>Note: Patient transport should begin as soon as any immediate patient(s) are ready for transport and destinations are determined by Control Facility or standing orders.</p> <p>Don't delay transport of immediate patients waiting for destinations for all patients.</p> 	<ol style="list-style-type: none"> 11. Vital signs to include: blood pressure, pulse, respirations, pulse oximetry. 12. Level of Consciousness 13. Treatment provided 14. Patient response to treatment. 15. Estimated time of arrival to receiving hospital 	<ol style="list-style-type: none"> 10. Patient Condition (e.g. stable, improving, worsening). 11. Vital Signs to include: blood pressure, pulse, respirations, pulse oximetry and Glasgow Coma Scale (best eye, motor, and verbal) 12. Interventions: <ol style="list-style-type: none"> a. BLS Treatment rendered and patient response. b. ALS Standing Orders implemented and patient response. 13. Primary survey (LOC, skin signs). 14. Secondary Physical Exam. 15. Past medical history/PMD. 16. Medications/allergies. 17. Estimated time of arrival to receiving hospital.
<p>May Receive Prehospital Report:</p> <p>MICN or Base Physician ONLY!</p>	<p>May Receive Prehospital Report:</p> <p>Any Receiving Hospital Medical Personnel</p>	<p>May Receive Prehospital Report:</p> <p>MICN or Base Physician ONLY!</p>