

## Medical Operations Staffing

- Medical Operations Supervisor
- Medical Radio/Scribe
- Doctors, EMTs, nurses, advance/disaster first aid trained staff
- Intake/Triage Area Coordinator with Volunteer Assistants
- Treatment Area Coordinator with Volunteer Assistants
- Recovery Area Coordinator with Volunteer Assistants
- Extended (Terminal) Care Area Coordinator with Volunteer Assistants
- Morgue Operations Coordinator with Volunteer Assistants
- Field triage/transport teams
  - Three (3) teams of six (6) each

## Medical Unit Communications

- Medical Radio/Scribe monitors field triage/transport team communications
- Communications informs Medical Radio/Scribe of triage/transport teams' deployment
- Medical Radio/Scribe informs Communications of medical status of triage/transport teams return to Medical Operations
- Medical Intake Coordinator directs incoming triage/transport teams
- Medical Intake Coordinator releases triage/transport teams to Medical Operations Supervisor for redeployment
- Medical Radio/Scribe informs Communications triage/transport teams' release
- Medical Radio/Scribe informs Communications of medical status
- Medical staff brief and offer field assistance to incoming triage/transport Teams

## Medical Operations Setup

- Medical field operations setup checklist
- Medical field operations checklist
- Medical field operations takedown checklist
- Status board and general status forms
- Individual patient status forms
  - Magnet/clothespin system
- Medical operations staff chart/form
- Medical operations tent
- Triage tarp area (canopy)
- Treatment area (canopy)

- Recovery area (canopy)
- Extended Care area (canopy)
- Morgue operations (canopy)

## Medical Field Operations Flow

- Incident Commander (IC) takes care of himself/herself first in a disaster
- IC takes care of his/her family second
- IC organizes Neighborhood EAP/ICP (Emergency Assembly Point/Incident Command Post) with SCRIBE
  - EAP/ICP communications are directed to the ICP
- IC directs a Communications Unit setup
- IC directs a Logistics Unit setup
- IC directs an Operations Unit setup
- Operations Unit establishes and deploys Recon (Rapid Assessment) Teams to gather neighborhood field conditions information
- Operations directs **Medical Unit** to set up its **Operations**
  - Prepares a neighborhood First Aid Station and Medical Operations
    - Staff area
    - Intake Triage Area (colored tarps or signage)
    - Treatment Area
    - Recovery Area
    - Terminal Injury Area
    - Morgue
- Unit is staffed by a minimum of three individuals to as many volunteers who wish to assist
  - Medical Unit Supervisor with Staff
    - Scribe/Radio Operator
    - Records unit activity
    - Transmits Medical Unit status periodically via FRS to IC via the Communications Unit and ultimately to the ICP
  - Intake/Triage Area Coordinator with Volunteer Assistants
    - Red Tarp (Immediate), Yellow Tarp (Delayed), Green Tarp (Minor)**
    - Patient tracking documentation is begun
  - Treatment Area Coordinator with Volunteer Assistants
    - Patient tracking documentation stays with patient
    - Red Red Tag Victims**

Yell **Yellow Tag Victims**

**Green Tarp Green Tag Victims**

Recovery Area Coordinator with Volunteer Assistants

Patient tracking documentation stays with patient

Without available professional medical services, understand that after the first 24 hours, every 24 hours thereafter victims have an upgraded injury severity

**Yellow to Red**

**Red to Blue**

**Blue to Black**

Setup Separate Areas

**Blue Tarp Area (Extended Care)**

Coordinator with Volunteer Assistants

Patient tracking documentation stays with patient

Compassionate comfort care as best as possible for those who are dying and when transport to official medical care units is not available

**Black Tarp Area (Deceased)**

Coordinator with Volunteer Assistants

Patient tracking documentation stays with patient

Patient essential information taken

Religious belief and personal contacts

Respectful and secure care for our deceased neighbors

**Send out field teams to perform triage, immediate treatment, and transport of neighbors to EAP for further care**

Helmets, surgical gloves under work gloves, goggles, headlamp, tools, stretcher, first aid supplies, radios

**Field teams of six persons**

Team Leader w/Radio, Medical Assistance (2), Support (3)

Accept wounded brought in by neighbors not on Triage-Transport Team

Perform extended medical treatment as able for as long as needed

Transport patients from the EAP to ICP or official medical care units for extended care, if possible

## **First Aid Components**

Injury treatment (be prepared to improvise)

Medical supplies

Medication monitoring (allergy, antidepressants, diabetes, heart, other conditions)

- Psychological response
- Documentation
- FRS radios
- Triage-Transport Team supplies

### **Documentation and Forms Kit**

- Medical field team reporting document 214
- Medical Activity Log HCS 214
- Medical unit patient accounting document
- Medical patient assessment (male)
- Medical patient assessment (female)
- Blank paper (be prepared to improvise)

### **Medical Supplies and Equipment**

- Triage tarps or signage (**Green, Yellow, Red, Blue, Black**)
- Clothesline and clothespins
- Marking pens (**green, yellow, red, blue, black**)
- Headlamps
- Stretcher(s)
- (2) Canopies and a tent (if possible)
- Table and two (2) chairs
- FRS radios, Ham radio
- Field medical Kits
- Surgical kit
- Boost Oxygen, QuikClot, Water
- All sizes of bandages
- Cardboard for splinting
- Emergency blankets and ponchos
- Food and Water for Staff
- Food and Water for Injured

### **How do you provision a medical station?**

- Central neighborhood cache
- DRC if your EAP has one (EAP then becomes an Area ICP)
- Personal medical cache

- Preassigned cache materials and contents among neighbors
- Duplicate resources among neighbors' caches
- First Aid Station staff sustain themselves out of their Bug Out Bags

**Additional Questions?**









