

Multiple Casualty Incident (MCI) Response Procedures Checklist

1110-L

Name:	Date:
Provider Agency:	Evaluator:

Objective: Describe/demonstrate the procedures for managing EMS aspects of an MCI.

Equipment: MCI identification vests, S-SV EMS approved triage tags, S-SV EMS MCI Checklist and Medical Branch Organizational Chart (837-A), S-SV EMS Prehospital Patient Tracking Worksheet (837-B).

Performance Criteria: Prehospital personnel will be required to adequately describe/demonstrate the criteria for declaring an MCI, the procedures for managing an MCI and the appropriate utilization of triage tags. Performance criteria may be assessed through instructor-led training, or by participation in a tabletop or full-scale MCI exercise.

Step	Description	Does	Does Not
1	 Verbalizes MCI definition/criteria: An incident which requires more emergency medical resources to adequately deal with victims than those available during routine responses, including an incident that meets any of the following criteria: Five (5) or more IMMEDIATE and/or DELAYED patients, or Ten (10) or more MINOR patients, irrespective of the number of IMMEDIATE and/or DELAYED patients, or At the discretion of prehospital or hospital providers 		
2	Describes the roles/functions of the Control Facility (CF), the requirement/ importance of early CF notification/utilization (including a pre-alert when possible), and identifies the appropriate CF to notify/utilize based on the incident location: • Enloe Medical Center – Butte, Colusa & Glenn counties • Rideout Regional Medical Center – Sutter & Yuba counties • Sutter Roseville Medical Center – Western slope of Nevada & Placer counties • Tahoe Forest Hospital – Tahoe & eastern slope of Nevada & Placer counties • Mercy Medical Center Redding – Shasta, Siskiyou & Tehama counties		
3	Verbalizes/demonstrates the most appropriate method of CF communication during an MCI (telephone, radio – including channel, etc.) based on local procedures		
4	Verbalizes/demonstrates requirement to check in with or establish Incident Command (IC) and/or Medical Command upon arrival at scene		
5	Verbalizes/demonstrates required roles/functions during an MCI (Triage, Treatment & Transportation), and describes a basic understanding of these roles/functions		
6	Describes/demonstrates MCI identification vest utilization		
7	Describes/demonstrates the ordering process for additional transport/medical resources (all additional resources must be ordered through the IC)		
8	Demonstrates appropriate utilization of triage tags and verbalizes/demonstrates the use of triage tags on all patients prior to transport		



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9	 Describes/demonstrates triage procedures/considerations: Initial triage should take no longer than 30 – 60 seconds per patient Treatment prior to triage of all patients shall be restricted to airway establishment and hemorrhage control, to include the use of tourniquets and/or hemostatic dressings CPR generally should not be initiated unless an overabundance of ALS personnel, equipment, transport units, and immediate receiving facilities exist Any patient who has a tourniquet or hemostatic dressing applied to control hemorrhage shall be deemed an 'IMMEDIATE' regardless of the START triage algorithm Patients placed in spinal motion restriction and/or unaccompanied pediatric patients must be categorized as 'DELAYED' at a minimum, as these patients require an ED room/bed upon arrival at the receiving hospital 		
10	(OPTIONAL) – Describes/demonstrates appropriate utilization of a colored ribbon patient triage system if utilized by the EMS provider		
11	 Describes/demonstrates appropriate CF communication requirements/procedures: The Patient Transportation Unit Leader/Medical Communications Coordinator will contact the CF and provide patient information and total number of transport resources available Patient information provided to the CF will be limited to age, gender, triage category, triage tag number, primary injury type and any special considerations (pregnancy, burns, etc.) The Patient Transportation Unit Leader/Medical Communications Coordinator will work collaboratively with the CF to ensure appropriate patient distribution based on patient conditions and available transportation resources 		
12	Describes/demonstrates appropriate utilization of the S-SV EMS Prehospital Patient Tracking Worksheet (837-B)		
13	Describes/demonstrates notification of the CF when all patients have been transported and the incident has ended		