

Run Number: _____
 Address: _____
 Scene _____
 Conditions _____
 Actions _____
 Mode _____

Fire Dept. Name
Multi-Casualty Incident
Worksheet

Safety: _____
 PIO: _____
 Liaison: _____
 R.I.T.: _____

Command	Location
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Medical Group	Rescue/Extrication Group	Transportation Group
Triage Unit		
Treatment Unit		
-	-	-
-	-	-
-	-	-
-	-	-
-	-	-

1 st Alarm	Additional Units	Additional Transport Units
E-	M-	Silverton
E-	M-	Silverton
M-	M-	Pagosa
M-	R-	Pagosa
R-	E-	Mancos
BC/Chief-	Helicopters	SJ County
EMS60-	H-	
EMS1-	H-	Other
	H-	

Staging Location: _____

Command Post
 Addtl. Units
 Helicopter
 Landing Zone
 AMB Staging
 PD Supervisor

- Goals**
- ___ Triage
 - ___ Control Hazards
 - ___ Ignition Sources
 - ___ Rescue/Extrication
 - ___ Additional Resources
 - ___ Helicopter
 - ___ Traffic Control
 - ___ MCI Disaster Plan

Triage Report		
Primary		Secondary
# of Patients	Status	# of Patients
	Immediate	
	Delayed	
	Minor	
	Deceased	

Notify Chief Officer	EMS Chief	Hospital Notification	DFRA EMS Captain	Police Supervisor	CHP	Heavy Rescue	La Plata Hazmat	Public Works	Red Cross MRC	MCI Disaster Plan
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Patient Tracking								
Pt #	Triage #	Status	Age/Gender	Name	Extrication Time	Off the Scene	Transport Unit	Hospital Destination
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								