## **Med Com MCI Worksheet**

ALL MCI's	Ambulance Company		Unit #	Hospital Reques Trauma Burn C		Hospital Assignment		
	Age	Sex	Patie	ent Status	<b>Chief Complaint</b>	For T	rauma Patients ONLY	
Patient Report (Base)		☐ M ☐ F	Acute Mode	_	Head Chest Abdomen	BP Unab	e / or vole to obtain because: no Low Circumstances	
Triage Report (O.C.C.)								
Optional Medic Unit Patient ID:								
ALL MCI's	Ambu	lance Co	ompany	Unit #	Hospital Reques ☐ Trauma ☐ Burn ☐ C		Hospital Assignment	
	Age	Sex	Patient :	Status:	Chief Complaint	For	Trauma Patients ONLY	
Patient Report (Base)		☐ M ☐ F	Acute Mode		Head Chest Abdomen	BP Unab	e or le to obtain because: oo Low Circumstances	
	Triage Report (O.C.C.)							
Optional Medic Unit Patient ID:								
	Ambulance Company							
ALL MCI's	Ambu	lance Co	ompany	Unit #	Hospital Reques  Trauma Burn C		Hospital Assignment	
	Ambu Age	lance Co Sex	ompany Patient			ther	Hospital Assignment  Trauma Patients ONLY	
				Status:	☐ Trauma ☐ Burn ☐ C  Chief Complaint	For T Pulse BP Unab		
MCI's  Patient Report (Base)		Sex  M F	Patient S Acute Model Mild	Status:	Trauma Burn C  Chief Complaint  Head Chest Abdomen	For T Pulse BP Unab	rauma Patients ONLY	
MCI's  Patient Report (Base)	Age  Report C.C.)	Sex  M F	Patient S Acute Model Mild	Status:  TRAUMA rate	Trauma Burn C  Chief Complaint  Head Chest Abdomen	For T Pulse BP Unab	rauma Patients ONLY	
Patient Report (Base)	Age Report C.C.) Medic U	Sex  M F	Patient S Acute Model Mild	Status:  TRAUMA rate  Delayed	Trauma Burn C  Chief Complaint  Head Chest Abdomen	For T Pulse BP Unab	rauma Patients ONLY	
Patient Report (Base)  Triage (O. Optional	Age Report C.C.) Medic U	Sex  M F	Patient S Acute Moder Mild  mmediate Pa	Status:  TRAUMA rate  Delayed  tient ID:  Unit #	Trauma Burn O  Chief Complaint Head Chest Abdomen Minor  Hospital Reques	For T Pulse BP Unab	rauma Patients ONLY	
Patient Report (Base)  Triage (O. Optional	Age Report C.C.) Medic U	Sex  M F  Init  Jance Co	Patient S Acute Moder Mild  mmediate Pa	Status:  TRAUMA rate  Delayed  tient ID:  Unit #  Status:  TRAUMA	Trauma Burn O  Chief Complaint Head Chest Abdomen Minor  Hospital Reques Trauma Burn O  Chief Complaint	Pulse BP Unab Pu	rauma Patients ONLY	
Patient Report (Base)  Triage (O. Optional ALL MCI's  Patient Report (Base)	Age Report C.C.) Medic U	Sex  M F  Jnit  Sex  M F	Patient S Acute Model Mild  mmediate Pa  patient S  Acute Model Mild	Status:  TRAUMA rate  Delayed  tient ID:  Unit #  Status:  TRAUMA	Trauma Burn O  Chief Complaint  Head Chest Abdomen  Minor  Hospital Reques Trauma Burn O  Chief Complaint  Head Chest Abdomen  Head Chest Abdomen Abdomen	Pulse BP Unab Pu	Trauma Patients ONLY	

## **MED COM Checklist**

- Don position vest
- Establish position forward of Ambulance Loading
- Contact OCC on 6 Alpha & ID yourself as "(incident name) Med Com"
- Contact Base or OCC on assigned Talk Group as directed
- ID yourself as "(incident name) Med Com"
- Provide incident description and estimated number of patients
- Use Med Com MCI Worksheet
- Request worksheet information from Patient Medic
- Relay worksheet information to Base or OCC
- Relay hospital destination to ambulance driver
- Advise driver to monitor Med 10