

- Napa County
- Sonoma County
- Mendocino County



BASE HOSPITAL MCI NOTIFICATION RESOURCE GUIDE

MCI Plan Activation

First arriving paramedic will initiate MCI Plan activation by contacting you either on the radio or cellular phone.

Once the Incident Command System (ICS) is established at the scene, your contact person from the scene will be the **Medical Communications Coordinator** ("Medical Communications" will be his/her radio call sign).

Unlike day-to-day radio communications, MCI related communications must be brief and concise. Brevity is the key to successful MCI communications and interaction.

Base Hospital Interaction

The jurisdictional base hospital MCI interaction will be a three step process as follows:

Step 1

Initial MCI Plan activation notification will be given to you by the first arriving paramedic, once the incident is confirmed as a genuine MCI. You will be advised of the following:

- Intention to activate MCI Plan.
- The location of the incident (community and/or area of the county –North, South, East, West or Core area).
- Type of incident (trauma, medical, exposure etc.)
- Initial estimate of the total number of patients.
- Initial estimate of Immediate (critical) patients.

Estimated time for second call back by **Medical Communications** to you.

The paramedic expects you to poll the local or out of area hospitals to find out bed availability or reasons why these facilities may not be able to accept patients (e.g., scanner down, no neuro etc.) Note: You do not have to poll hospitals past the point of having enough capacity to handle the number of patients tallied at the scene, e.g. 5 patients, 3 facilities polled and between them they can accept the 5 patients.

Step 2

The Medical Communications Coordinator will re-contact you for the availability and transport plan report, (the results of your roll call to the appropriate area hospitals).

The **medical communications coordinator** will discuss any concerns, transport priorities and general overview of the transport plan. S/he will then inform you of how many "immediate" and "delayed" categorized patients each hospital will be receiving.

The information being relayed for each patient should include:

- Triage Tag #
- Triage category
- Age
- Gender Chief complaint
- Destination
- Transporting unit

You, as jurisdictional base hospital, will then re-contact each of the polled hospitals and relay the number of patients each hospital is receiving. If a polled hospital is not receiving any patients, you must communicate that information as well.

Applicable for:

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BASE HOSPITAL MCI NOTIFICATION RESOURCE GUIDE CONTINUED

Step 3

Final Report - Medical Communications will review and confirm all transported patients with patients with the base station MICN. If more than one receiving facility is being utilized, a Patient Triage and Destination Log must be completed at the scene by the field paramedic (Medical Communications Coordinator or Transportation Group Supervisor) and given or faxed to the Incident Commander and faxed to the Base Hospital as soon as possible. This report will close the incident, therefore get as much information as you need. Be sure to give the Medical Communications Coordinator your name and the name of the base hospital physician.

Report to Receiving Hospital

Upon initiating transport, each ambulance leaving the scene will make a brief radio report to the designated receiving hospital. This report will be made as early as possible to allow the hospital to prepare. The radio report will be brief and include:

- Mechanism of injury
- Critical deficiencies in vital signs
- Treatment initiated

Report brevity is necessary in order to free up the radio channel for other transporting units and to allow the paramedic to continue treatment.
