

MEDICAL/TECHNICAL SPECIALIST – BIOLOGICAL/INFECTIOUS DISEASE

Mission: Advise the Incident Commander and/or Operations Section Chief, as assigned, on issues related to biological/infectious disease emergency response.

Date: _____	Start: _____	End: _____	Position Assigned to: _____	Initial: _____
Position Reports to: _____		Signature: _____		
Hospital Command Center (HCC) Location: _____			Telephone: _____	
Fax: _____		Other Contact Info: _____		Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research as needed to determine hazard and safety information critical to treatment and decontamination concerns for the victims and personnel.		
Verify from the ED, infectious disease physicians and infection control staff and report the following information to the Incident Commander or Operations Section Chief and Medical Care Branch Director: <ul style="list-style-type: none"> • Number and condition of patients affected, including the non-symptomatic • Type of biological/infectious disease involved • Medical problems present in addition biological/infectious disease involved • Measures taken (e.g., cultures, supportive treatment) • Potential for industrial, chemical, or radiological material exposure expected in addition to biological/infectious disease exposure and scope of communicability 		
Collaborate with the Public Health Department in developing a case definition. Ensure that the case definition is communicated to the Medical Care Branch Director, Safety Officer and all patient care areas.		
Communicate with Operations Section Chief and Safety Officer regarding disease information and staff protection.		
Ensure that appropriate standard of isolation precautions are being used in all patient care areas. Arrange for just-in-time training regarding isolation precautions as required.		
Meet regularly with the Command staff, Operations Section Chief and Medical Care Branch Director to plan and project patient care needs.		
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
Recommend input for PIO press releases as requested.		
Contact the local Public Health Department, in collaboration with the Liaison Officer, as required, for notification, support, and investigation resources.		

Immediate (Operational Period 0-2 Hours)	Time	Initial
Assist the Clinic Administration Medical/Technical Specialist and the Employee Health and Well-Being Unit in organizing Mass Dispensing Clinics or Point of Dispensing for antibiotic prophylaxis or mass vaccination, as indicated and if recommended by the Public Health Department.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Establish regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operation needs.		
Maintain communications with Medical Care Branch Director and other Command staff to co-monitor development of the incident and maintain information resource availability.		
Direct collection of samples for analysis or evidence.		
Monitor and Ensure all samples are correctly packaged for shipment to the most appropriate testing location/laboratory.		
Continue to recommend and maintain appropriate isolation precautions and staff protection as the incident evolves.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Meet regularly with the Incident Commander or Operations Section Chief to update current status and conditions.		
Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques.		
Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the Employee Health & Well-Being Unit Leader. Provide for staff rest periods and relief.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues and other relevant incident information.		

Demobilization/System Recovery	Time	Initial
Ensure Employee Health and Well-Being Unit, ED physicians and infectious disease physicians and infection control staff are aware of any significant information resulting from exposure to biological/infectious agent.		
Ensure the Security Branch Director has custody of all suspected contaminated evidence for release to proper (verified) authority in a proper container, properly sealed.		
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, brief the Incident Commander or Operations Section Chief, as appropriate, on current problems, outstanding issues, and follow-up requirements.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the Operations Section Chief or Incident Commander, as appropriate.		

Demobilization/System Recovery	Time	Initial
Submit comments to the Incident Commander or Operations Section Chief, as appropriate for discussion and possible inclusion in the after-action report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone • Local public health department reporting forms

MEDICAL/TECHNICAL SPECIALIST – CHEMICAL

Mission: Advise the Incident Commander or Operations Section Chief, as assigned, on issues related to specific chemical incidents and emergency response. In conjunction with the Medical Care Branch Director, and Hazmat Branch Director organize and prepare the Emergency Department to receive chemical exposure casualties in a manner consistent with hospital procedures and best practices to preserve the operational integrity of the Emergency Department and other areas in the hospital receiving patients.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initial: _____	
Position Reports to: _____ Signature: _____	
Hospital Command Center (HCC) Location: _____ Telephone: _____	
Fax: _____ Other Contact Info: _____ Radio Title: _____	

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research as needed to determine hazard and safety information critical to treatment and decontamination concerns for the victims and personnel.		
Assess size and location of chemical exposure. Implement hospital decontamination and/or spill response plan. Coordinate activities with the Hazardous Materials Branch Director and the Medical Care Branch Director.		
Recommend decontamination procedures and staff personal protection, including respiratory protection.		
Verify from the ED Attending and report to the Incident Commander the following information from the scene: <ul style="list-style-type: none"> • Number and condition of both uncontaminated and contaminated patients • Type and amount of chemical involved • Type of chemical incident: <ul style="list-style-type: none"> ○ External chemical exposure only ○ External contamination only ○ External contamination with internal exposure • Time incident occurred • Medical problems present besides chemical contamination • Measures taken at the incident site (e.g., air monitors and skin contamination levels) 		
Verify with the Safety Officer and the Security Branch Director that all access to the ED has been secured to prevent media or other non-authorized people from entering into the treatment area during treatment or the decontamination process.		
Ensure the monitoring and surveying of hospital staff providing patient decontamination		



Immediate (Operational Period 0-2 Hours)	Time	Initial
in conjunction with Hazmat Branch Director and care from the arrival of the patients through the decontamination and medical care process, and post-event monitoring of all personnel after care is provided.		
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
Coordinate activities with the Hazardous Materials Branch Director and the Medical Care Branch Director.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Regularly update the following on your actions and recommendations: <ul style="list-style-type: none"> • Industrial hygienist • Employee Health and Well-Being Unit • Safety Officer • Hazardous Materials Branch Director • Victim Decontamination Unit Leader • Facility/Equipment Decontamination Unit Leader 		
Respond to requests and concerns from incident personnel regarding chemical agents involved and treatment concerns for victims and personnel.		
Regularly meet with the Incident Commander and Operations Section Branch Directors for updates on the situation regarding chemical contamination/decontamination issues.		
Ensure staff use safe practices and procedures.		
Continue to communicate regularly with Command staff and the Medical Care Branch Director to co-monitor the delivery and quality of medical care in all patient areas.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Continue to meet regularly with the Incident Commander or Operations Section Branch Directors to keep apprised of current conditions and monitor the quality of medical care.		
In collaboration with the Operations Section's HazMat Branch Director, oversee final personnel clearance checks and report clearance to the ED attending, Medical Care Branch Director, Employee Health and Well-Being Unit Leader and Operations Section Chief: <ul style="list-style-type: none"> • Ambulances and staff • Assisting law enforcement personnel 		
Direct monitoring of facility decontamination processes as needed, in collaboration with the HazMat Branch Director.		
In collaboration with Hazmat Branch Director and local law enforcement determine how contaminated personal vehicles used to bring patients to the hospital should be managed.		
Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques.		
Observe all staff and volunteers for signs of stress and inappropriate behavior. Report		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
concerns to the Mental Health Unit Leader. Provide for staff rest periods and relief.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues and other relevant incident information.		

Demobilization/System Recovery	Time	Initial
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the Operations Section Chief or Incident Commander, as appropriate.		
Upon deactivation of your position, brief the Incident Commander or Operations Section Chief, as appropriate, on current problems, outstanding issues, and follow-up requirements.		
Submit comments to the Incident Commander or Operations Section Chief, as appropriate, for discussion and possible inclusion in the after-action report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Hospital decontamination plan • Hospital spill response plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone • Material safety data sheets • NIOSH Pocket Guide • Emergency Response Guidebook • Managing Hazardous Materials Incidents, Volume II – Hospital Emergency Departments: A Planning Guide for the Management of Contaminated Patients • Managing Hazardous Materials Incidents, Volume III – Medical Management Guidelines (MMGs) for Acute Chemical Exposures

MEDICAL/TECHNICAL SPECIALIST – RADIOLOGICAL

Mission: Advise the Incident Commander or Operations Section Chief, as assigned, on issues related to specific radiological incidents and emergency response. In conjunction with the Medical Care Branch Director, organize and prepare the Emergency Department to receive radiation exposure casualties in a manner consistent with hospital procedures and best practices to preserve the operational integrity of the Emergency Department.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initial: _____
Position Reports to: _____ Signature: _____
Hospital Command Center (HCC) Location: _____ Telephone: _____
Fax: _____ Other Contact Info: _____ Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research as needed to determine hazard and safety information critical to treatment and decontamination concerns for the victims and personnel.		
Verify from the ED Attending and report to the Incident Commander the following information from the scene: <ul style="list-style-type: none"> • Number and condition of both uncontaminated and contaminated patients • Type and amount of radioactive isotopes involved • Type of radiation incident: <ul style="list-style-type: none"> ○ External radiation exposure only ○ External contamination only ○ External contamination with internal exposure • Time incident occurred • Medical problems present besides radionuclide contamination • Measures taken at the incident site (e.g., air monitors, fixed radiation monitors, nasal smear counts, and skin contamination levels) • Potential for industrial, biological, or chemical material exposures expected in addition to radionuclide. 		
Direct the preparation of the emergency department for the arrival of victims using PPE dress-out for radiological decontamination response		
Designate a person with a survey meter at the entrance of the decontamination room to monitor personnel and equipment leaving the radiation decontamination room.		
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
Verify with the Safety Officer and the Security Branch Director that all access to the ED has been secured to prevent media or other non-authorized people from entering into		

Immediate (Operational Period 0-2 Hours)	Time	Initial
the treatment area during treatment or the decontamination process.		
Ensure the monitoring and surveying of hospital staff providing patient decontamination and care from the arrival of the patient through the decontamination and care process, and post-event monitoring of all personnel after care is provided.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Meet regularly with the Incident Commander or Operations Section Chief and Branch Directors to update current situation and conditions.		
Continue to ensure appropriate decontamination processes including: <ul style="list-style-type: none"> • Monitoring patients and decontamination team during and after the care of the patient(s). • Surveying of the contaminated areas, patients and exposed personnel. • Collecting samples for subsequent analysis. • Collecting and managing any radioactive wastes (solid and liquid) generated during the decontamination process. • Evaluating staff dosimeters and ensuring proper follow-up if indicated. 	E	
Ensure use of all safety practices and procedures.		
Prepare and maintain records and reports.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
In collaboration with the Operations Section’s HazMat Branch Director, oversee final personnel clearance checks and report clearance to the ED attending, Medical Care Branch Director, Employee Health and Well-Being Unit Leader and Operations Section Chief: <ul style="list-style-type: none"> • Ambulance and attendants • Route from ambulance entrance to radiation decontamination room • Radiation decontamination room • Patient(s) and staff 		
Direct monitoring of facility decontamination processes as needed, in collaboration with the HazMat Branch Director.		
Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques.		
Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the Employee Health & Well-Being Unit Leader. Provide for staff rest periods and relief.		
Upon shift change, brief replacement on the status of all ongoing operations, issues and other relevant incident information.		

Demobilization/System Recovery	Time	Initial
Ensure analysis of all specimens taken from potentially contaminated items or water.		
Ensure staff and Employee Health and Well-Being Unit Leader is aware of any		



Demobilization/System Recovery	Time	Initial
significant information resulting from exposure to radiation and recommendations for follow up care and monitoring.		
Ensure the Security Officer has custody of all suspected contaminated evidence for release to proper (verified) authority in a proper container, properly sealed.		
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the Operations Section Chief or Incident Commander, as appropriate.		
Upon deactivation of your position, brief the Incident Commander or Operations Section Chief, as appropriate, on current problems, outstanding issues, and follow-up requirements.		
Submit comments to the Incident Commander or Operations Section Chief, as appropriate for discussion and possible inclusion in the after-action report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone

MEDICAL/TECHNICAL SPECIALIST – CLINIC ADMINISTRATION

Mission: Maintain hospital-based clinic’s capabilities and services to the best of staff’s and facility’s capabilities. Advise the Incident Commander or Operations Section Chief, as assigned, on issues related to clinic operations.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initial: _____	
Position Reports to: _____ Signature: _____	
Hospital Command Center (HCC) Location: _____	Telephone: _____
Fax: _____	Other Contact Info: _____ Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Oversee staffed Mass Dispensing Clinic or Point of Dispensing for antibiotic prophylaxis or vaccination, as indicated or if recommended by the Public Health Department.		
Regularly meet with Operations and Logistics Section Chiefs to determine current status of operations and needs to continue operations.		
Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research as needed to determine hazard and safety information critical to treatment and decontamination concerns for the victims and personnel.		
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
Notify appropriate clinic managers and staff of emergency and brief on current status.		
Obtain outpatient/clinic census and status and emphasize proactive actions. Request projection reports on clinical activities as appropriate (e.g., 4, 8, 24, and 48 hours from start of incident).		
Assess clinical resources (staff, supplies, equipment, and facilities) that could be mobilized to assist as needed during emergency.		
Maintain routine flow of clinic patients, materials, and information while emergency is being addressed and respond promptly to issues that may disrupt that flow.		
Implement interim measures to maintain critical clinic operations, as necessary, in response to disruption of patient services. Implement business continuity/recovery plans for affected clinics.		
For emergencies directly affecting hospital operations due to being damaged/overwhelmed (including evacuation): <ul style="list-style-type: none"> • Determine which clinic sites could support acute patient care (immediate or delayed). • Provide clinic resources (staff, supplies, and facilities) to assist hospital operations as requested. 		

Immediate (Operational Period 0-2 Hours)	Time	Initial
For emergencies directly affecting clinic operations due to being damaged/overwhelmed: <ul style="list-style-type: none"> • Determine extent of continuation of normal clinic activities based on emergency. • Authorize rescheduling/cancellation of clinic appointments. • Consider activation of an alternate care site for clinic operations. • Update the Incident Commander and request assistance as needed. 		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Continue regular meetings with the Incident Commander, Operations Section Chief or Branch Directors for updates on the situation regarding hospital operations needs.		
Continue communications with Medical Care Branch Director, Operations and Logistics Section Chiefs to co-monitor the delivery and quality of medical care in all patient areas.		
Receive updates from the clinic managers of issues which may be pertinent to the emergency.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Continue to meet regularly with the Incident Commander or Operations Section Chief, as assigned, to keep apprised of current conditions.		
Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques.		
Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the Mental Health Team Leader. Provide for staff rest periods and relief.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues and other relevant incident information.		

Demobilization/System Recovery	Time	Initial
Continue to ensure business recovery plans are being followed.		
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the Operations Section Chief or Incident Commander, as appropriate.		
Upon deactivation of your position, brief the Operations Section Chief or Incident Commander, as appropriate, on current problems, outstanding issues, and follow-up requirements.		
Submit comments to the Operations Section Chief or Incident Commander, as appropriate, for discussion and possible inclusion in the After-Action Report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes • Section accomplishments and issues 		



Demobilization/System Recovery	Time	Initial
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Clinic emergency plan • Department and facility business continuity plans • Hospital organization chart • Hospital telephone directory • Radio/satellite phone

MEDICAL/TECHNICAL SPECIALIST – HOSPITAL ADMINISTRATION

Mission: Maintain hospital's capability and services. Advise the Incident Commander or Operations Section Chief, as assigned, on issues related to hospital operations.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initial: _____	
Position Reports to: _____ Signature: _____	
Hospital Command Center (HCC) Location: _____	Telephone: _____
Fax: _____ Other Contact Info: _____	Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander or Section Chiefs.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Meet with Command staff and Section Chiefs to determine current status of operations, critical issues and resource needs to continue operations.		
Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research as needed to determine hazard and safety information critical to treatment and decontamination concerns for the victims and personnel.		
Notify appropriate hospital administrators/managers of the emergency.		
Assess hospital resources (staff, supplies, and facilities) to assist as needed during the emergency.		
Maintain the routine flow of hospital patients, materials, and information while the emergency is being addressed and respond promptly to issues that may disrupt that flow.		
Collaborate with the Operations Section's Medical Care Branch Director and Operations Section Chief to implement altered (austere) standards of patient care as needed. Ensure the change in patient care standards is communicated to hospital staff and physicians.		
Implement interim measures, as necessary, in response to disruption of patient services.		
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
For emergencies directly affecting hospital operations due to being damaged/overwhelmed (including evacuation): <ul style="list-style-type: none"> • Determine extent of continuation of normal hospital activities based on emergency. • Update the Incident Commander and request assistance as needed. 		
For emergencies directly affecting clinic operations due to being damaged/overwhelmed: <ul style="list-style-type: none"> • Provide hospital resources (staff, supplies, and facilities) to assist clinic operations as requested. 		

Immediate (Operational Period 0-2 Hours)	Time	Initial
Coordinate with Business Continuity Unit Leader to facilitate the implementation of business recovery plans in hospital departments. Continue to monitor and evaluate continuity plan use.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Establish regular meetings with the Incident Commander or Section Chiefs, as appropriate, for updates on the situation regarding hospital operations needs.		
Continue to maintain communications with Command staff and Medical Care Branch Director to co-monitor the delivery and quality of medical care in all patient areas.		
Continue to receive updates from the hospital administrators/managers regarding critical response and recovery issues and update Section Chiefs and Command Staff as appropriate.		
Coordinate with Business Continuity Unit Leader to monitor and evaluate business continuity plan use.		
Provide input to the Public Information Officer regarding media releases.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Continue to meet regularly with the Incident Commander to keep apprised of current conditions.		
Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques.		
Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the Mental Health Unit Leader. Provide for staff rest periods and relief.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues and other relevant incident information.		

Demobilization/System Recovery	Time	Initial
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the Incident Commander or assigned Section Chief, as appropriate.		
Upon deactivation of your position, brief the Incident Commander or assigned Section Chief, as appropriate, on current problems, outstanding issues, and follow-up requirements.		
Submit comments to the Incident Commander or assigned Section Chief, as appropriate for discussion and possible inclusion in the after-action report; topics include: <ul style="list-style-type: none"> Review of pertinent position descriptions and operational checklists 		



Demobilization/System Recovery	Time	Initial
<ul style="list-style-type: none"> • Recommendations for procedure changes • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone

MEDICAL/TECHNICAL SPECIALIST – LEGAL AFFAIRS

Mission: Organize and provide legal advice to Command and Section staff on issues related to incident action planning and response.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initial: _____

Position Reports to: _____ **Signature:** _____

Hospital Command Center (HCC) Location: _____ Telephone: _____

Fax: _____ Other Contact Info: _____ Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander or assigned Section Chief.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Research legal issues related to incident response and report to Command Staff as appropriate.		
Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research and clerical activities as needed.		
Provide requested recommendations from a legal perspective to Command staff or Section Chiefs.		
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
Communicate medical-legal questions to appropriate local/state authorities, in collaboration with the Liaison Officer.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Continue to work with Command staff and Section Chiefs to resolve medical-legal issues.		
Update local/state legal authorities on hospital legal issues, in conjunction with the Liaison Officer.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Continue medical-legal advising and notifications.		

Demobilization/System Recovery	Time	Initial



Demobilization/System Recovery	Time	Initial
Provide legal guidance on system recovery issues.		
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to your assigned Section Chief or Incident Commander, as appropriate.		
Upon deactivation of your position, brief the Incident Commander or your assigned Section Chief, as appropriate, on current problems, outstanding issues, and follow-up requirements.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to your assigned Section Chief or Incident Commander, as appropriate.		
Submit comments to the Incident Commander or your assigned Section Chief, as appropriate, for discussion and possible inclusion in the after-action report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone • PC with internet access, as available

MEDICAL/TECHNICAL SPECIALIST – RISK MANAGEMENT

Mission: Recommend to Command staff and Section Chiefs, any changes to risk-management and loss-prevention program policies to comply with emergency safety legislation and industry practices. Advise on the most cost effective plans to minimize asset liability. Act as the liaison to attorneys, insurance companies and individuals, investigating any incidences that may result in asset loss.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initial: _____	
Position Reports to: _____ Signature: _____	
Hospital Command Center (HCC) Location: _____ Telephone: _____	
Fax: _____ Other Contact Info: _____ Radio Title: _____	

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research and clerical activities as needed.		
Coordinate internal and external messages with Public Information Officer.		
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
Communicate regularly with Finance/Administration Section's Claims/Compensation Unit and Employee Health and Well-Being Unit on risk management issues.		
Continuously monitor response practices and identify for the Command Staff appropriate modifications or changes working in conjunction with Safety Officer, Security Branch Director and appropriate technical specialists.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Continue monitoring for and reporting high risk activities to the Safety Officer or other appropriate Section Chief.		
Brief Incident Command staff of potential practice issues and needed modifications and changes.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Continue monitoring for high risk activities.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Brief Command staff and Section Chiefs of potential practice issues and needed modifications and changes.		

Demobilization/System Recovery	Time	Initial
Coordinate staff injury medical follow up, in conjunction with Employee Health and Well-Being Unit and Claims/Compensation Unit.		
Coordinate staff injury reports, documentation and related issues with Finance Section Chief.		
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to your assigned Section Chief or the Incident Commander, as appropriate.		
Upon deactivation of your position, brief your assigned Section Chief or the Incident Commander, as appropriate on current problems, outstanding issues, and follow-up requirements.		
Submit comments to your assigned Section Chief or the Incident Commander, as appropriate, for discussion and possible inclusion in the after-action report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone • PC with internet access, as available

MEDICAL/TECHNICAL SPECIALIST – MEDICAL STAFF

Mission: Advise the Incident Commander or Operations Section Chief, as assigned, on issues related to the medical staff.

Date: _____	Start: _____	End: _____	Position Assigned to: _____	Initial: _____
Position Reports to: _____		Signature: _____		
Hospital Command Center (HCC) Location: _____			Telephone: _____	
Fax: _____		Other Contact Info: _____		Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Request staffing assistance from the Labor Pool and Credentialing Unit Leader to assist with rapid research and clerical assistance as needed.		
Assist Labor Pool & Credentialing Unit Leader with medical staff credentialing issues.		
Assist the Support Branch Director with completion of the Medical Staff Plan (HICS Form 206)		
Meet regularly with Medical Care Branch Director and Support Branch Director to plan and project patient care needs.		
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Meet regularly with the Incident Commander or the Operations Section Chief, as appropriate, to brief on medical staff status and projected needs.		
Maintain regular communications with the Medical Care Branch Director to co-monitor the delivery and quality of medical care in all patient areas.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Continue to ensure medical staff related response issues are identified and effectively managed. Report critical issues to the Medical Care Branch Director and Operations Section Chief, as appropriate.		
Continue to meet regularly with the Operations Section Chief or Incident Commander, as assigned, to update current conditions and status.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques.		
Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the Employee Health & Well-Being Unit Leader. Provide for staff rest periods and relief.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues and other relevant incident information.		

Demobilization/System Recovery	Time	Initial
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the Operations Section Chief or Incident Commander, as appropriate.		
Upon deactivation of your position, brief the Operations Section Chief or Incident Commander, as appropriate, on current problems, outstanding issues, and follow-up requirements.		
Submit comments to the Operations Section Chief or the Incident Commander, as appropriate, for discussion and possible inclusion in the after-action report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone

MEDICAL/TECHNICAL SPECIALIST – PEDIATRIC CARE

Mission: Advise the Incident Commander or Operations Section Chief, as assigned, on issues related to pediatric emergency response.

Date: _____	Start: _____	End: _____	Position Assigned to: _____	Initial: _____
Position Reports to: _____		Signature: _____		
Hospital Command Center (HCC) Location: _____			Telephone: _____	
Fax: _____		Other Contact Info: _____		Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander or Operations Section Chief, as assigned.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Meet with the Command staff, Operations and Logistics Section Chiefs and the Medical Care Branch Director to plan for and project pediatric patient care needs.		
Communicate with the Operations Section Chief to obtain: <ul style="list-style-type: none"> • Type and location of incident • Number and condition of expected pediatric patients • Estimated arrival time to facility • Unusual or hazardous environmental exposure 		
Request staffing assistance from the Labor Pool and Credentialing Unit Leader, as needed, to assist with rapid research as needed to determine hazard and safety information critical to treatment and decontamination concerns for the pediatric victims.		
Provide pediatric care guidance to Operation Section Chief and Medical Care Branch Director based on incident scenario and response needs		
Ensure pediatric patient identification and tracking practices are being followed.		
Communicate and coordinate with Logistics Section Chief to determine pediatric: <ul style="list-style-type: none"> • Medical care equipment and supply needs • Medications with pediatric dosing • Transportation availability and needs (carts, cribs, wheel chairs, etc.) 		
Communicate with Planning Section Chief to determine pediatric: <ul style="list-style-type: none"> • Bed availability • Ventilators • Trained medical staff (MD, RN, PA, NP, etc.) • Additional short and long range pediatric response needs 		
Ensure that appropriate pediatric standards of care are being followed in all clinical areas.		
Collaborate with the PIO to develop media and public information messages specific to pediatric care recommendations and treatment.		

Immediate (Operational Period 0-2 Hours)	Time	Initial
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Continue to communicate and coordinate with Logistics Section Chief the availability of pediatric equipment and supplies.		
Coordinate with Logistics and Planning Section Chiefs to expand/create a Pediatric Patient Care area, if needed.		
Continue to monitor pediatric care activities to Ensure needs are being met.		
Meet regularly with the Operations Section Chief and Medical Care Branch Director for updates on the situation regarding hospital operations and pediatric needs.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Ensure the provision of resources for pediatric mental health and appropriate event education for children and families.		
Continue to ensure pediatric related response issues are identified and effectively managed		
Continue to meet regularly with the Operations Section Chief or Incident Commander, as appropriate, for situation status updates and to communicate critical pediatric care issues.		
Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques.		
Observe all staff and volunteers for signs of stress and inappropriate behavior. Report concerns to the Mental Health Unit Leader. Provide for staff rest periods and relief.		
Upon shift change, brief your replacement on the status of all ongoing operations, issues and other relevant incident information.		

Demobilization/System Recovery	Time	Initial
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		
Upon deactivation of your position, ensure all documentation and Operational Logs (HICS Form 214) are submitted to the Operations Section Chief or Incident Commander, as appropriate.		
Upon deactivation of your position, brief the Operations Section Chief or Incident Commander, as appropriate, on current problems, outstanding issues, and follow-up requirements.		
Submit comments to the Operations Section Chief or Incident Commander, as appropriate, for discussion and possible inclusion in the after-action report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes 		



Demobilization/System Recovery	Time	Initial
<ul style="list-style-type: none"> • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone • Local public health reporting forms

MEDICAL/TECHNICAL SPECIALIST — MEDICAL ETHICIST

Mission: Assist Command staff and Section Chiefs to address management issues with ethical implications.

Date: _____ Start: _____ End: _____ Position Assigned to: _____ Initial: _____

Position Reports to: Incident Commander Signature: _____

Hospital Command Center (HCC) Location: _____ Telephone: _____

Fax: _____ Other Contact Info: _____ Radio Title: _____

Immediate (Operational Period 0-2 Hours)	Time	Initial
Receive appointment and briefing from the Incident Commander.		
Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). Put on position identification.		
Notify your usual supervisor of your HICS assignment.		
Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis.		
Evaluate key ethical issues such as standards of care, priority of care, use of limited resources, etc. and develop recommendations for addressing the issues.		
Coordinate with Command Staff, Section Chiefs and other Medical/Technical Specialists as appropriate.		
Participate in briefings and meetings and contribute to the Incident Action Plan, as requested.		
Document all communications (internal and external) on an Incident Message Form (HICS Form 213). Provide a copy of the Incident Message Form to the Documentation Unit.		

Intermediate (Operational Period 2-12 Hours)	Time	Initial
Continue to evaluate implemented programs or recommendations that have ethical impacts to staff, patients, visitors and the facility.		
Brief Incident Command staff of potential practice issues and needed modifications and changes.		

Extended (Operational Period Beyond 12 Hours)	Time	Initial
Continue monitoring issues that have potential ethical implications and assist with identifying practice considerations		
Brief Command Staff and Section Chiefs of potential practice issues and recommended modifications and changes.		

Demobilization/System Recovery	Time	Initial
Ensure return/retrieval of equipment and supplies and return all assigned incident command equipment.		

Demobilization/System Recovery	Time	Initial
Upon deactivation of your position, insure all documentation and Operational Logs (HICS Form 214) are submitted to your assigned Section Chief or the Incident Commander, as appropriate.		
Upon deactivation of your position, brief your assigned Section Chief or the Incident Commander, as appropriate, on current problems, outstanding issues, and follow-up requirements.		
Submit comments to your assigned Section Chief or the Incident Commander, as appropriate, for discussion and possible inclusion in the after-action report; topics include: <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes • Section accomplishments and issues 		
Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required.		

Documents/Tools
<ul style="list-style-type: none"> • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • Hospital emergency operations plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone • PC with internet access, as available