### PURPOSE:
DOCUMENT THE NUMBER OF INJURIES AND FATALITIES.

### ORIGINATION:
PATIENT TRACKING MANAGER.

### COPIES TO:
COMMAND STAFF, SECTION CHIEFS, AND DOCUMENTATION UNIT LEADER.

### HOSPITAL CASUALTY/FATALITY REPORT

<table>
<thead>
<tr>
<th>1. INCIDENT NAME</th>
<th>2. DATE PREPARED</th>
<th>3. TIME PREPARED</th>
<th>4. OPERATIONAL PERIOD DATE/TIME</th>
</tr>
</thead>
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#### 5. NUMBER OF CASUALTIES / FATALITIES

<table>
<thead>
<tr>
<th>ADULT</th>
<th>PEDIATRIC (&lt;18 YEARS OLD)</th>
<th>TOTAL</th>
<th>COMMENTS</th>
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<tr>
<th>Patients seen</th>
<th>Admitted</th>
<th>Critical care bed</th>
<th>Medical/surgical bed</th>
<th>Pediatric bed</th>
<th>Discharged</th>
<th>Transferred</th>
<th>Expired</th>
<th>Waiting to be seen</th>
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#### 6. PREPARED BY (PATIENT TRACKING MANAGER)

#### 7. FACILITY NAME