MEDICAL-TECHNICAL SPECIALIST: BIOLOGICAL/INFECTIOUS DISEASE

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

Position Reports to: **Incident Commander**	Command Location: _____	
Position Contact Information: Phone: (____) _____ - _____	Radio Channel: _____	
Hospital Command Center (HCC): Phone: (____) _____ - _____	Fax: (____) _____ - _____	
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
Receive appointment • Obtain a briefing from the Incident Commander on: o Size and complexity of the incident o Expectations of the Incident Commander o Incident objectives o Involvement of outside agencies, stakeholders, and organizations o The situation, incident activities, and any special concerns • Assume the role of Medical-Technical Specialist: Biological/Infectious Disease • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment		
Assess the operational situation • Conduct rapid research as needed to determine hazard and safety information critical to treatment for patients and hospital personnel • Verify with the emergency department, infectious disease physicians, and infection control staff, and report the following information to the Incident Commander, Operations Section Chief and Medical Care Branch Director: o Number and condition of patients affected, including those who are non-symptomatic o Type of biological or infectious disease involved o Medical problems present, in addition to biological or infectious disease involved o Measures taken (e.g., cultures, supportive treatment) o Treatment protocols indicated o Potential for industrial, chemical, or radiological material exposure expected in addition to biological or infectious disease exposure and scope of communicability		
Activities • Assess that appropriate standard of isolation precautions are being used in all patient care and reception areas • Assess recommended treatment and prophylaxis guidelines for biological agent		

• Assist with just-in-time training regarding isolation precautions and use of personal protective equipment (PPE), as required • Collaborate with the local 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 the Operations Section Chief and Safety Officer regarding disease information and staff protection • Meet regularly with the Hospital Incident Management Team (HIMT) to plan and project patient care needs • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested • Provide information to the Public Information Officer for press releases, as requested • Contact the local health department, in collaboration with the Liaison Officer, as required, for notification, support, and investigation resources • Collaborate with the Logistics Section Employee Health and Well-Being Unit in organizing mass dispensing activities for antibiotic prophylaxis or vaccination to staff, as indicated and if recommended by the local health department		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions on an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Intermediate Response (2 – 12 hours)	**Time**	**Initial**

Activities
• Transfer the Biological/Infectious Disease Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Direct the collection of samples for analysis and evidence
• Monitor and evaluate that all samples are correctly packaged for shipment to the most appropriate testing laboratory
• Continue to recommend and maintain appropriate isolation precautions and staff protection as the incident evolves
• Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operational needs
• Maintain communications with the Operations Section Medical Care Branch Director and other Hospital Incident Management Team (HIMT) staff to monitor the development of the incident and continue to provide information, as needed		

Documentation • HICS 213: Document all communications on a General Message Form		

MEDICAL-TECHNICAL SPECIALIST: BIOLOGICAL/INFECTIOUS DISEASE

• HICS 214: Document all key activities, actions, and decisions on an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Extended Response (greater than 12 hours)	**Time**	**Initial**
Activities • Transfer the Biological/Infectious Disease Medical-Technical Specialist role, if appropriate o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital o Address any health, medical, and safety concerns o Address political sensitivities, when appropriate o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • Monitor the status of personal protective equipment (PPE), pharmaceuticals, and staff to ensure safe operational status; assist with decision making for scarce allocation of resources • Meet regularly with the Incident Commander or Operations Section Branch Directors to get updates on the current status and conditions • Recommend appropriate post-exposure medical care (e.g., prophylaxis, isolation, observation)		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions on an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Demobilization/System Recovery	**Time**	**Initial**
Activities • Transfer the Biological/Infectious Disease Medical-Technical Specialist role, if appropriate o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital o Address any health, medical, and safety concerns o Address political sensitivities, when appropriate		

o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel is properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • Participate in other briefings and meetings as required • Submit comments to Incident Commander on lessons learned and procedural or equipment changes needed		
• Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include: o Review of pertinent position activities and operational checklists o Recommendations for procedure changes o Accomplishments and issues • Participate in stress management and after action debriefings		
Documentation • HICS 221: Demobilization Check-Out • Ensure all documentation is provided to the Planning Section Documentation Unit		

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 - Demobilization Check-Out ❑ Hospital Emergency Operations Plan ❑ Incident Specific Plans or Annexes ❑ Hospital Infection Control Policy and Procedure ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

MEDICAL-TECHNICAL SPECIALIST: CHEMICAL

Mission: Advise the Incident Commander or Section Chief, as assigned, on issues related to specific chemical incidents and emergency response.

Position Reports to: **Incident Commander**	Command Location: _____	
Position Contact Information: Phone: (____) _____-_____	Radio Channel: _____	
Hospital Command Center (HCC): Phone: (____) _____-_____	Fax: (____) _____-_____	
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
Receive appointment • Obtain briefing from the Incident Commander on: o Size and complexity of the incident o Expectations of the Incident Commander o Incident objectives o Involvement of outside agencies, stakeholders, and organizations o The situation, incident activities, and any special concerns • Assume the role of Medical-Technical Specialist: Chemical • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment		
Assess the operational situation • Conduct rapid research as needed to determine the hazard and safety information critical to treatment and decontamination concerns for the patients and hospital personnel • Assess the type, size, and location of chemical contamination		
Activities • Recommend decontamination procedures and staff personal protection, including respiratory protection • Assist in implementing the hospital Decontamination and Spill Response Plan, as directed • Verify with the emergency department leadership and report the following information to the Incident Commander: o Number and condition of both non-contaminated and contaminated patients and personnel o Type and amount of chemical involved and nature of exposure: ▪ External chemical exposure only ▪ External contamination only ▪ External contamination with internal exposure		

o Time incident occurred o Medical problems present, in addition to chemical contamination o Assessment measures taken at the incident site (e.g., air monitors, skin contamination levels) • Verify with the Safety Officer and the Operations Section Security Branch Director that all access to the emergency department as well as contamination sites, has been secured to prevent media or other non-authorized people from entering the area during treatment or the decontamination process • Assist with just-in-time training regarding use of personal protective equipment (PPE), as required • Ensure the monitoring and surveying of: o Hospital personnel providing patient decontamination, in conjunction with the Operations Section Hazardous Materials Branch Director o Care provided for arriving patients through the decontamination and medical care process • Ensure any post-event monitoring of all personnel after care is provided • Notify the Poison Control Center to inform them of the event and obtain additional tactical assistance • Ensure the local water authority and appropriate regulatory agencies are notified of problem and actions being taken • Seek information from appropriate resources (manuals, ATSDR guidance, poison control, chemical guidance web sites, etc.) • Coordinate activities with the Operations Section Hazardous Materials Branch Director and the Medical Care Branch Director • Meet regularly with the Hospital Incident Management Team (HIMT) to plan and project patient care needs • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP) development, as requested • Provide information to the Public Information Officer for press releases, as requested • Collaborate with external resources (e.g., local health department, public safety, HazMat Team) as needed		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Intermediate Response (2 – 12 hours)	Time	Initial
Activities • Transfer the Chemical Medical-Technical Specialist role, if appropriate o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital o Address any health, medical, and safety concerns o Address political sensitivities, when appropriate		

o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • Respond to requests and concerns from incident personnel regarding chemical agents involved and the treatment concerns for patients and staff • Establish a regular meeting schedule with the Incident Commander or Operations Section Branch Directors for updates on the situation regarding hospital operational needs • Regularly update the following on your actions and recommendations: o Industrial hygienist o Safety Officer o Logistics Section Employee Health and Well-Being Unit o Operations Section Hazardous Materials Branch Director o Operations Section Victim Decontamination Unit Leader o Operations Section Facility/Equipment Decontamination Unit Leader		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Extended Response (greater than 12 hours)	Time	Initial
Activities • Transfer the Chemical Medical-Technical Specialist role, if appropriate o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital o Address any health, medical, and safety concerns o Address political sensitivities, when appropriate o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • In collaboration with the Operations Section HazMat Branch Director, oversee staff clearance checks and provide a clearance report to the emergency department, Operations Section Medical Care Branch Director, Logistics Section Employee Health and Well-Being Unit Leader, and Operations Section Chief • Direct the monitoring of hospital decontamination processes as needed, in collaboration with the HazMat Branch Director • In collaboration with the Operations Section HazMat Branch Director and Security Branch Director, determine how contaminated personal vehicles used to bring patients to the hospital should be managed • Meet regularly with the Incident Commander or Operations Section Branch Directors to get updates on the current status and conditions • Recommend appropriate post-decontamination medical care (antidotes, observation, and long tern surveillance)		
Documentation • HICS 213: Document all communications on a General Message Form		

• HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Demobilization/System Recovery	Time	Initial

Activities
• Transfer the Chemical Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Recommend and support notification to regulatory authorities of the incident including all response and recovery actions
• Participate in other briefings and meetings as required
• Submit comments to Incident Commander on lessons learned and procedural or equipment changes needed
• Brief the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include:
  o Review of pertinent position descriptions and operational checklists
  o Recommendations for procedure changes
  o Accomplishments and issues
• Participate in stress management and after action debriefings		

Documentation • HICS 221: Demobilization Check-Out • Ensure all documentation is submitted to the Planning Section Documentation Unit		

MEDICAL-TECHNICAL SPECIALIST: CHEMICAL

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 – Demobilization Check-Out ❑ Hospital Emergency Operations Plan ❑ Hospital Decontamination and Spill Response Plan ❑ Incident Specific Plans or Annexes ❑ Material Safety Data Sheets (MSDS) ❑ National Institute for Occupational Safety and Health (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 for Acute Chemical Exposures ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/Internet/amateur radio/2-way radio for communication

MEDICAL-TECHNICAL SPECIALIST: RADIOLOGICAL

Mission: Advise the Incident Commander or Section Chief, as assigned, on issues related to the response to radiological incidents.

Position Reports to: **Incident Commander**	Command Location: _____	
Position Contact Information: Phone: (____)_____-_____	Radio Channel: _____	
Hospital Command Center (HCC): Phone: (____)_____-_____	Fax: (____)_____-_____	
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
Receive appointment • Obtain a briefing from the Incident Commander on: o Size and complexity of the incident o Expectations of the Incident Commander o Incident objectives o Involvement of outside agencies, stakeholders, and organizations o The situation, incident activities, and any special concerns • Assume the role of Medical-Technical Specialist: Radiological • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment		
Assess the operational situation • Verify from the emergency department leadership or other clinical sources and report the following information to the Incident Commander: o Number and condition of both non-contaminated and contaminated patients and hospital staff o Type and amount of radioactive isotopes involved o Type of radiation incident: ▪ External radiation exposure only ▪ External contamination only ▪ External contamination with internal exposure o Time incident occurred o Medical problems present, in addition to radionuclide contamination o Assessment measures taken at the incident site (e.g., air monitors, fixed radiation monitors, nasal smear counts, and skin contamination levels) o Potential for industrial, biological, or chemical material exposures expected in addition to radionuclide		

MEDICAL-TECHNICAL SPECIALIST: RADIOLOGICAL

Activities • Advise the Operations Section Hazardous Materials (HazMat) Branch Director on the preparation of the emergency department for the arrival of victims, including personal protective equipment (PPE) for radiological decontamination response • Verify with the Safety Officer and the Operations Section Security Branch Director that all access to the emergency department has been secured to prevent media or other non-authorized people from entering into the treatment area during treatment or the decontamination process • Coordinate activities with the Operations Section HazMat Branch Director and the Medical Care Branch Director • Meet regularly with the Hospital Incident Management Team (HIMT) to plan and project patient care needs • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested • Ensure that a staff member trained in the use of a survey meter is stationed at the entrance of the decontamination area to monitor personnel and equipment leaving the radiation decontamination room or area • Address radiation related questions that may arise from other areas such as the laboratory, operating rooms, and critical care units • Provide clinical staff with treatment guidelines for isotope exposure as applicable, including countermeasures • Assure that the exposure of responding personnel is tracked and recorded (film badge or dosimetry) • Ensure notification of the Radiation Safety Officer of the incident, impact and current activities • Provide information to the Public Information Officer for press releases, as requested • Collaborate with external resources (i.e. local health department, Poison Control Center, Radiation Emergency Assistance Center or Training Site) as needed • Obtain information from appropriate resources or web site programs • Ensure communications are sent to the local water authority and other local, state and federal agencies if decontamination runoff is an issue		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Intermediate Response (2 – 12 hours)	**Time**	**Initial**

Activities
• Transfer the Radiological Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate		

o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • Respond to requests and concerns from incident personnel regarding radiological agents involved and treatment concerns for victims and hospital personnel • Develop plans to assess, isolate, and remediate any hospital contamination • Continue to ensure appropriate decontamination processes including: o Monitoring patients and the decontamination team during and after patient care o Surveying contaminated areas, patients, and exposed hospital personnel o Collecting samples for subsequent analysis o Collecting and managing any radioactive wastes (solid and liquid) generated during the decontamination process o Evaluating staff dosimeters and ensuring proper follow up if indicated • Prepare and maintain records and reports • Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operational needs • Regularly update the following on your actions and recommendations: o Industrial hygienist o Safety Officer o Logistics Section Employee Health and Well-Being Unit o Operations Section Hazardous Materials Branch Director o Operations Section Victim Decontamination Unit Leader		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Extended Response (greater than 12 hours)	Time	Initial
Activities • Transfer the Radiological Medical-Technical Specialist role, if appropriate o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital o Address any health, medical, and safety concerns o Address political sensitivities, when appropriate o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • In collaboration with the Operations Section Hazardous Materials (HazMat) Branch Director, oversee the medical clearance for hospital personnel and report the results to the Operations Section Chief and Logistics Section Employee Health and Well-Being Unit Leader • Direct the monitoring of hospital decontamination processes as needed, in collaboration with the Operations Section HazMat Branch Director • In collaboration with the Operations Section HazMat Branch Director and Security Branch Director, determine how contaminated personal vehicles used to bring patients to the hospital should be managed		

MEDICAL-TECHNICAL SPECIALIST: RADIOLOGICAL

• Meet regularly with the Incident Commander or Operations Section Branch Directors to update on current status and conditions		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Demobilization/System Recovery	**Time**	**Initial**

Activities
• Transfer the Radiological Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Ensure an analysis is made of all specimens taken from potentially contaminated items or water
• Ensure hospital personnel and Employee Health and Well-Being Unit Leader are aware of any significant information resulting from exposure to radiation and recommendations for follow up-care and monitoring
• Ensure the Operations Section Security Branch Director has custody of all suspected contaminated evidence for release to proper authority in sealed container
• Ensure the return or retrieval of equipment and supplies
• Participate in other briefings and meetings as required
• Submit comments to the Incident Commander on lessons learned and procedural or equipment changes needed
• Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include:
  o Review of pertinent position activities and operational checklists
  o Recommendations for procedure changes
  o Accomplishments and issues
• Participate in stress management and after action debriefings		

Documentation • HICS 221: Demobilization Check-Out • Ensure all documentation is submitted to the Planning Section Documentation Unit		

MEDICAL-TECHNICAL SPECIALIST: RADIOLOGICAL

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 - Demobilization Check-Out ❑ Hospital Emergency Operations Plan ❑ Incident Specific Plans or Annexes ❑ Material Safety Data Sheets (MSDS) ❑ National Institute for Occupational Safety and Health (NIOSH) Pocket Guide ❑ Managing Hazardous Materials Incidents, Volume II - Hospital Emergency Departments: Planning Guide for the Management of Contaminated Patients ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

MEDICAL-TECHNICAL SPECIALIST: CLINIC ADMINISTRATION

Mission: Maintain hospital-based clinic's capabilities and services as the situation warrants and circumstances allow. Advise the Incident Commander or Section Chief, as assigned, on issues related to clinic operations.

Position Reports to: **Incident Commander** Command Location: _____

Position Contact Information: Phone: (_____)_____-_____ Radio Channel:_____

Hospital Command Center (HCC): Phone: (_____)_____-_____ Fax: (_____)_____-_____

Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
Receive appointment • Obtain briefing from the Incident Commander on: o Size and complexity of the incident o Expectations of the Incident Commander o Incident objectives o Involvement of outside agencies, stakeholders, and organizations o The situation, incident activities, and any special concerns • Assume the role of Medical-Technical Specialist: Clinic Administration • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment		
Assess the operational situation • Assess the clinical resources (staff, supplies, equipment, and facilities) that could be mobilized to assist as needed during the incident • Obtain clinic census and status		
Activities • Regularly meet with Operations and Planning Section Chiefs to determine current status of operations and need to continue or expand clinic operations • Notify appropriate clinic managers and staff of the incident and brief them on the current status • Request or prepare projections on clinical activities, as appropriate, for 4, 8, 12, 24, 48, and 96 hours from the time of the incident onset • Maintain the routine flow of clinic patients, materials, and information while the incident 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 any disruption of patient services • Implement Business Continuity Plans for any affected clinics • Determine which clinic sites could support acute patient care (immediate or delayed)		

MEDICAL-TECHNICAL SPECIALIST: CLINIC ADMINISTRATION

• Provide clinic resources (staff, supplies, and facilities) to assist hospital operations as requested • Oversee medication distribution of antibiotic prophylaxis or vaccination to staff or their families if directed • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Intermediate Response (2 – 12 hours)	Time	Initial

Activities
• Transfer the Clinic Administration Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Receive updates from the clinic managers on issues that may be pertinent to the incident
• Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operational needs
• Determine the capability and financial impact of extended clinic operations beyond normal operating hours		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Extended Response (greater than 12 hours)	Time	Initial

Activities
• Transfer the Clinic Administration Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns		

o Address political sensitivities, when appropriate o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Demobilization/System Recovery	**Time**	**Initial**
Activities • Transfer the Clinic Administration Medical-Technical Specialist role, if appropriate o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital o Address any health, medical, and safety concerns o Address political sensitivities, when appropriate o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • Participate in other briefings and meetings as required • Submit comments to Incident Commander on lessons learned and procedural or equipment changes needed • Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include: o Review of pertinent position activities and operational checklists o Recommendations for procedure changes o Accomplishments and issues • Participate in stress management and after action debriefings		
Documentation • HICS 221: Demobilization Check-Out • Ensure all documentation is provided to the Planning Section Documentation Unit		

MEDICAL-TECHNICAL SPECIALIST: CLINIC ADMINISTRATION

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 - Demobilization Check-Out ❑ Clinic Emergency Operations Plan ❑ Hospital Emergency Operations Plan ❑ Incident Specific Plans or Annexes ❑ Department and hospital Business Continuity Plans ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

MEDICAL-TECHNICAL SPECIALIST: HOSPITAL ADMINISTRATION

Mission: Maintain oversight of hospital service capability and operations. Advise the Incident Commander or Section Chief, as assigned, on issues related to hospital operations.

Position Reports to: **Incident Commander**	Command Location: _____	
Position Contact Information: Phone: ( ) - _____	Radio Channel: _____	
Hospital Command Center (HCC): Phone: ( ) - _____	Fax: ( ) - _____	
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	**Time**	**Initial**

Receive appointment
• Obtain a briefing from the Incident Commander on:
  o Size and complexity of the incident
  o Expectations of the Incident Commander
  o Incident objectives
  o Involvement of outside agencies, stakeholders, and organizations
  o The situation, incident activities, and any special concerns
• Assume the role of Medical-Technical Specialist: Hospital Administration
• Review this Job Action Sheet
• Put on position identification (e.g., position vest)
• Notify your usual supervisor of your assignment		

Assess the operational situation • Assess hospital resources (staff, supplies, equipment, and facilities) that could be mobilized to assist as needed during the incident • Provide information to the Incident Commander on the operational situation including capabilities and limitations		
Activities • Meet with Hospital Incident Management Team (HIMT) to determine the current status of operations, critical issues, and resource needs to continue operations • Notify appropriate hospital administrators and managers of the incident; conduct briefings • Maintain the flow of hospital patients, service delivery, materials, and information while the incident is being addressed, and respond promptly to issues that may disrupt that flow • Prepare to implement plans to accommodate a surge of patients into the hospital; review those services that can be delayed or stopped if needed • Collaborate with the Operations Section Chief and Medical Care Branch Director to implement crisis standards of care if needed		

• Ensure that if implemented, the crisis standards of care are communicated to physicians, staff, and board of directors, and others as appropriate • Determine the support requirements to keep non-emergency related hospital operations intact and functioning effectively • Collaborate with the Medical-Technical Specialist: Clinic Administration to assess clinic and hospital needs, critical issues, and ability to assist • Provide hospital resources (staff, supplies, and facilities) to assist clinic operations as requested and appropriate • Coordinate with Operations Section Business Continuity Branch Director to facilitate the implementation of Business Continuity Plans among affected hospital functions and departments, as appropriate • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Intermediate Response (2 – 12 hours)	Time	Initial

Activities
• Transfer the Hospital Administration Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Continue to receive updates from the hospital administrators and managers regarding critical response and recovery issues, and update the Hospital Incident Management Team (HIMT) as appropriate
• Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operational needs
• Coordinate with the Operations Section Business Continuity Unit Leader to monitor and evaluate Business Continuity Plan use
• Provide input to the Public Information Officer regarding media releases		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

MEDICAL-TECHNICAL SPECIALIST: HOSPITAL ADMINISTRATION

Extended Response (greater than 12 hours)	Time	Initial

Activities
• Transfer the Hospital Administration Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Meet regularly with the Incident Commander or Operations Section Branch Directors to provide and receive updates on current status and conditions		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication • *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Demobilization/System Recovery	Time	Initial

Activities
• Transfer the Hospital Administration Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Participate in other briefings and meetings as required
• Submit comments to Incident Commander on lessons learned and procedural or equipment changes needed
• Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include:
  o Review of pertinent position activities and operational checklists
  o Recommendations for procedure changes
  o Accomplishments and issues
• Participate in stress management and after action debriefings		

Documentation • HICS 221: Demobilization Check-Out • Ensure all documentation is submitted to the Planning Section Documentation Unit		

MEDICAL-TECHNICAL SPECIALIST: HOSPITAL ADMINISTRATION

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 - Demobilization Check-Out ❑ Hospital Emergency Operations Plan ❑ Incident Specific Plans or Annexes ❑ Department and facility Business Continuity Plans ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

MEDICAL-TECHNICAL SPECIALIST: LEGAL AFFAIRS

Mission: Organize and provide legal advice to the Incident Commander or Section Chief, as assigned, on issues related to the Incident Action Plan (IAP) and response.

Position Reports to: **Incident Commander**	Command Location: _____	
Position Contact Information: Phone: ( ) -	Radio Channel: _____	
Hospital Command Center (HCC): Phone: ( ) -	Fax: ( ) -	
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
Receive appointment • Obtain briefing from the Incident Commander on: o Size and complexity of incident o Expectations of Incident Commander o Incident objectives o Involvement of outside agencies, stakeholders, and organizations o The situation, incident activities, and any special concerns • Assume the role of Medical-Technical Specialist: Legal Affairs • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment		
Activities • Regularly meet with Operations and Planning Section Chiefs to determine the current status of operations and the impact on the ability to maintain operations • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested • Communicate medical-legal questions to appropriate local and state authorities, in collaboration with the Liaison Officer		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

MEDICAL-TECHNICAL SPECIALIST:
LEGAL AFFAIRS

Intermediate Response (2 – 12 hours)	Time	Initial

Activities
• Transfer the Legal Affairs Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Continue to work with the Hospital Incident Management Team (HIMT) to resolve legal issues
• Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operational needs
• Update local and state legal authorities on hospital legal issues, in conjunction with the Liaison Officer		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Extended Response (greater than 12 hours)	Time	Initial

Activities
• Transfer the Legal Affairs Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Address any outstanding or pending legal issues
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Continue to work with the Hospital Incident Management Team (HIMT) to resolve legal issues
• Meet regularly with the Incident Commander or Operations Section Branch Directors to get updates on the current status and conditions		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

MEDICAL-TECHNICAL SPECIALIST: LEGAL AFFAIRS

Demobilization/System Recovery	Time	Initial

Activities
• Transfer the Legal Affairs Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Provide legal guidance on system recovery issues
• Participate in other briefings and meetings as required
• Submit comments to Incident Commander on lessons learned and procedural or equipment changes needed
• Submit comments to the Planning Section for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include:
  o Review of pertinent position activities and operational checklists
  o Recommendations for procedure changes
  o Accomplishments and issues
• Participate in stress management and after action debriefings		

Documentation • HICS 221: Demobilization Check-Out • Ensure all documentation is provided to the Planning Section Documentation Unit		

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 - Demobilization Check-Out ❑ Hospital Emergency Operations Plan ❑ Incident Specific Plans or Annexes ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication ❑ Computer with internet access

MEDICAL-TECHNICAL SPECIALIST: RISK MANAGEMENT

Mission: Assess the need for and advise the Incident Commander or Section Chief, as assigned, regarding changes to risk management and loss prevention program policies as appropriate to response to this incident or emergency safety legislation. Act as the liaison to attorneys, insurance companies, and individuals, investigating any incidents that may result in asset loss or other risk.

Position Reports to: **Incident Commander** Command Location: _____

Position Contact Information: Phone: (____) ____-_____ Radio Channel: _____

Hospital Command Center (HCC): Phone: (____) ____-_____ Fax: (____) ____-_____

Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
Receive appointment • Obtain a briefing from the Incident Commander on: o Size and complexity of the incident o Expectations of the Incident Commander o Incident objectives o Involvement of outside agencies, stakeholders, and organizations o The situation, incident activities, and any special concerns • Assume the role of Medical-Technical Specialist: Risk Management • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment		
Activities • Communicate regularly with Finance/Administration Section Compensation/Claims Unit and Logistics Section Employee Health and Well-Being Unit on risk management issues • Work with Legal Affairs, as needed, on response issues such as deviation from regulatory standards, modified standards of care, EMTALA, HIPPA, evacuation, credentialing, and volunteer utilization • Continuously monitor response practices and identify for the Hospital Incident Management Team (HIMT) appropriate modifications or changes, working in conjunction with Safety Officer, Operations Section Security Branch Director, and appropriate Medical-Technical Specialists • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested • Coordinate internal and external messages with Public Information Officer		

MEDICAL-TECHNICAL SPECIALIST:
RISK MANAGEMENT

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Intermediate Response (2 – 12 hours)	**Time**	**Initial**

Activities
• Transfer the Risk Management Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Continue monitoring for and reporting high risk activities to the Safety Officer or other appropriate Section Chief
• Brief the Hospital Incident Management Team (HIMT) on potential practice issues and needed modifications and changes
• Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operational needs		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Extended Response (greater than 12 hours)	**Time**	**Initial**

Activities
• Transfer the Risk Management Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Continue provision of advice and guidance on risk management issues and actions to Command Staff		

MEDICAL-TECHNICAL SPECIALIST:
RISK MANAGEMENT

Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Demobilization/System Recovery	**Time**	**Initial**

Activities
• Transfer the Risk Management Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Assist the Logistics Section Employee Health and Well-Being Unit and Finance/Administration Section Compensation/Claims Unit with the follow up of staff injury and exposure
• Participate in other briefings and meetings as required
• Submit comments to Incident Commander on lessons learned and procedural or equipment changes needed
• Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include:
  o Review of pertinent position activities and operational checklists
  o Recommendations for procedure changes
  o Accomplishments and issues
• Participate in stress management and after action debriefings		

Documentation • HICS 221: Demobilization Check-Out • Ensure all HCC documentation is provided to the Planning Section Documentation Unit Leader		

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 - Demobilization Check-Out ❑ Hospital Emergency Operations Plan ❑ Incident Specific Plans or Annexes ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication ❑ Computer with internet access

MEDICAL-TECHNICAL SPECIALIST: MEDICAL STAFF

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

Position Reports to: **Incident Commander**	Command Location: _____	
Position Contact Information: Phone: (____) _____ - _____	Radio Channel: _____	
Hospital Command Center (HCC): Phone: (____) _____ - _____	Fax: (____) _____ - _____	
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
Receive appointment • Obtain a briefing from the Incident Commander on: o Size and complexity of the incident o Expectations of the Incident Commander o Incident objectives o Involvement of outside agencies, stakeholders, and organizations o The situation, incident activities, and any special concerns • Assume the role of Medical-Technical Specialist: Medical Staff • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment		
Assess the operational situation • Assess hospital medical staff availability and resources • Provide information to the Incident Commander medial staff situation including capabilities and limitations		
Activities • Assist the Logistics Section Labor Pool and Credentialing Unit Leader with medical staff credentialing issues • Address the credentialing, utilization, and oversight of volunteer practitioners • Meet regularly with the Operations Section Medical Care Branch Director and Planning Section to plan and project patient care needs • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested • Coordinate with the Hospital Incident Management Team (HIMT) as appropriate		
Documentation • HICS 206: Assist the Logistics Section Support Branch Director with completion of Staff Medical Plan • HICS 213: Document all communications on a General Message Form		

MEDICAL-TECHNICAL SPECIALIST:
MEDICAL STAFF

• HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Intermediate Response (2 – 12 hours)	**Time**	**Initial**

Activities
• Transfer the Medical Staff Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Meet regularly with the Incident Commander or the Operations Section Chief, as appropriate, to brief them on medical staff status and projected needs
• Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operational needs
• Maintain regular communications with the Medical Care Branch Director to co-monitor the delivery and quality of medical care in all patient areas		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Extended Response (greater than 12 hours)	**Time**	**Initial**

Activities
• Transfer the Medical Staff Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Continue to ensure response issues related to the medical staff are identified and effectively managed
• Report critical issues to the Operations Section Chief and Medical Care Branch Director, as appropriate		

MEDICAL-TECHNICAL SPECIALIST:
MEDICAL STAFF

• Meet regularly with the Incident Commander or Operations Section Branch Directors to update them on the current status and conditions		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Demobilization/System Recovery	**Time**	**Initial**

Activities
• Transfer the Medical Staff Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Participate in other briefings and meetings as required
• Submit comments to Incident Commander on lessons learned and procedural or equipment changes needed
• Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include:
  o Review of pertinent position activities and operational checklists
  o Recommendations for procedure changes
  o Accomplishments and issues
• Participate in stress management and after action debriefings		

Documentation • HICS 221: Demobilization Check-Out • Ensure all documentation is provided to the Planning Section Documentation Unit		

MEDICAL-TECHNICAL SPECIALIST:
MEDICAL STAFF

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 204 - Assignment List ❑ HICS 206 - Staff Medical Plan ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 - Demobilization Check-Out ❑ Hospital Emergency Operations Plan ❑ Incident Specific Plans or Annexes ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

MEDICAL-TECHNICAL SPECIALIST: PEDIATRIC CARE

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

Position Reports to: **Incident Commander**	Command Location: _____	
Position Contact Information: Phone: (____) _____-_____	Radio Channel: _____	
Hospital Command Center (HCC): Phone: (____) _____-_____	Fax: (____) _____-_____	
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
Receive appointment • Obtain a briefing from the Incident Commander on: o Size and complexity of the incident o Expectations of the Incident Commander o Incident objectives o Involvement of outside agencies, stakeholders, and organizations o The situation, incident activities, and any special concerns • Assume the role of Medical-Technical Specialist: Pediatric Care • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment		
Assess the operational situation • Assess hospital pediatric staff availability and resources • Provide information to the Incident Commander regarding the pediatric staff situation including capabilities and limitations		
Activities • Meet with the Incident Commander, Operations and Planning Section Chiefs, and the Operations Section Medical Care Branch Director to plan for and project pediatric patient care needs • Verify with the emergency department leadership and report the following to the Incident Commander: o Type and location of incident o Number and condition of expected pediatric patients o Estimated arrival time to hospital o Any unusual or hazardous environmental exposure • Provide pediatric care guidance to Operations Section Chief and Medical Care Branch Director based on incident scenario and response needs • Ensure pediatric patient identification and tracking procedures are implemented • Communicate and coordinate with the Logistics Section Chief to determine pediatric:		

o Medical care equipment and supply needs o Medications with pediatric dosing o Transportation availability and needs (carts, cribs, wheel chairs, etc.) • Communicate with the Planning and Logistics Section Chiefs to determine pediatric: o Bed availability o Ventilators o Trained medical staff (MD, RN, PA, NP, etc.) o 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 Public Information Officer to develop media and public information messages specific to pediatric care recommendations and treatment • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Intermediate Response (2 – 12 hours)	Time	Initial
Activities • Transfer the Pediatric Care Medical-Technical Specialist role, if appropriate o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources and the role of external agencies in support of the hospital o Address any health, medical, and safety concerns o Address political sensitivities, when appropriate o Instruct your replacement to complete the appropriate documentation and ensure appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A) • Assist the Operations Section Medical Care Branch Director to determine those pediatric patients that are best served by pediatric specialty units and those that should be considered for transfer to other areas of the hospital or other hospitals • Assist the Staging Manager and Liaison Officer to prioritize the transfer for selected pediatric patients as required, including coordination with destination hospitals and transportation resources for optimal care • Continue to communicate and coordinate with the Logistics Section Chief on the availability of pediatric equipment and supplies including but not limited to isolettes, beds, nutrition, supplies, and medications • Seek, if applicable, treatment guidance for how pediatric patients with specialty needs can be cared for pending transfer • Coordinate with the Logistics and Planning Section Chiefs to expand or create a pediatric patient care area, if needed • Establish a meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital operational and pediatric needs		

MEDICAL-TECHNICAL SPECIALIST: PEDIATRIC CARE

• Maintain regular communications with the Operations Section Medical Care Branch Director to co-monitor the delivery and quality of medical care in all patient areas		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Extended Response (greater than 12 hours)	**Time**	**Initial**

Activities
• Transfer the Pediatric Care Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see forms 203, 204, 214 and 215A)
• Ensure the provision of resources for pediatric behavioral health and appropriate event education for children and families
• Continue to ensure pediatric-related response issues are identified and effectively managed
• Meet regularly with the Incident Commander or Operations Section Chief to update them on the current status and conditions		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Demobilization/System Recovery	**Time**	**Initial**

Activities
• Transfer the Pediatric Care Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)		

MEDICAL-TECHNICAL SPECIALIST: PEDIATRIC CARE

• Participate in other briefings and meetings as required • Submit comments to the Incident Commander on lessons learned and procedural or equipment changes needed • Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include: o Review of pertinent position activities and operational checklists o Recommendations for procedure changes o Accomplishments and issues • Participate in stress management and after action debriefings		
Documentation • HICS 221: Demobilization Check-Out • Ensure all documentation is submitted to the Planning Section Documentation Unit		

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 204 - Assignment List ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 - Demobilization Check-Out ❑ Hospital Emergency Operations Plan ❑ Incident Specific Plans or Annexes ❑ Pediatric care guidelines ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication

MEDICAL-TECHNICAL SPECIALIST: MEDICAL ETHICIST

Mission: Advise the Incident Commander or Section Chief, as assigned, on issues with ethical implications.

Position Reports to: **Incident Commander**	Command Location: _____	
Position Contact Information: Phone: (____) _____ - _____	Radio Channel: _____	
Hospital Command Center (HCC): Phone: (____) _____ - _____	Fax: (____) _____ - _____	
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.
Position Assigned to:	Date: / /	Start: ____:____ hrs.
Signature:	Initials:	End: ____:____ hrs.

Immediate Response (0 – 2 hours)	Time	Initial
Receive appointment • Obtain briefing from the Incident Commander on: o Size and complexity of the incident o Expectations of the Incident Commander o Incident objectives o Involvement of outside agencies, stakeholders, and organizations o The situation, incident activities, and any special concerns • Assume the role of Medical-Technical Specialist: Medical Ethicist • Review this Job Action Sheet • Put on position identification (e.g., position vest) • Notify your usual supervisor of your assignment		
Assess the operational situation • Evaluate key ethical issues such as standards of care, priority of care, use of limited resources, etc., and develop recommendations for addressing the issues		
Activities • Participate in briefings and meetings, and contribute to the Incident Action Plan (IAP), as requested • Consult to the Incident Commander and Command Staff on matters where an ethics perspective is important to decision making • Coordinate with the Hospital Incident Management Team (HIMT) as appropriate		
Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

MEDICAL-TECHNICAL SPECIALIST:
MEDICAL ETHICIST

Intermediate Response (2 – 12 hours)	Time	Initial

Activities
• Transfer the Medical Ethicist Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the medical hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Continue to evaluate implemented programs or recommendations that have ethical impacts to staff, patients, visitors, and the hospital
• Meet with Medical Care Branch Director to review proposed alterations in provision of care and other clinical or administrative issues with ethical considerations
• Brief the Incident Commander and Operations Section Chief concerning potential practice issues and needed modifications and changes to the delivery of care
• Review the implications of early discharge with medical care providers
• Establish a regular meeting schedule with the Incident Commander or Operations Section Chief for updates on the situation regarding hospital ethical needs
• Maintain regular communications with the Operations Section Medical Care Branch Director to co-monitor the delivery and quality of medical care in all patient areas		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		
Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Extended Response (greater than 12 hours)	Time	Initial

Activities
• Transfer the Medical Ethicist Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Continue monitoring issues that have potential ethical implications and assist with identifying practice considerations
• Brief the Incident Commander and Section Chiefs on potential practice issues and recommended modifications and changes		

Documentation • HICS 213: Document all communications on a General Message Form • HICS 214: Document all key activities, actions, and decisions in an Activity Log on a continual basis		

MEDICAL-TECHNICAL SPECIALIST: MEDICAL ETHICIST

Communication *Hospital to complete: Insert communications technology, instructions for use and protocols for interface with external partners*		

Demobilization/System Recovery	**Time**	**Initial**

Activities
• Transfer the Medical Ethicist Medical-Technical Specialist role, if appropriate
  o Conduct a transition meeting to brief your replacement on the current situation, response actions, available resources, and the role of external agencies in support of the hospital
  o Address any health, medical, and safety concerns
  o Address political sensitivities, when appropriate
  o Instruct your replacement to complete the appropriate documentation and ensure that appropriate personnel are properly briefed on response issues and objectives (see HICS Forms 203, 204, 214, and 215A)
• Participate in other briefings and meetings as required
• Submit comments to the Incident Commander on lessons learned and procedural or equipment changes needed
• Submit comments to the Planning Section Chief for discussion and possible inclusion in an After Action Report and Corrective Action and Improvement Plan. Topics include:
  o Review of pertinent position activities and operational checklists
  o Recommendations for procedure changes
  o Accomplishments and issues
• Participate in stress management and after action briefings		

Documentation • HICS 221: Demobilization Check-Out • Ensure all documentation is submitted to the Planning Section Documentation Unit		

Documents and Tools
❑ HICS 203 - Organization Assignment List ❑ HICS 204 - Assignment List ❑ HICS 213 - General Message Form ❑ HICS 214 - Activity Log ❑ HICS 215A - Incident Action Plan (IAP) Safety Analysis ❑ HICS 221 - Demobilization Check-Out ❑ Hospital Emergency Operations Plan ❑ Incident Specific Plans or Annexes ❑ Hospital ethics guidelines ❑ Hospital organization chart ❑ Hospital telephone directory ❑ Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication