

METRO TRAINING MANUAL

MULTI-CASUALTY INCIDENT (MCI) GENERAL GUIDELINES

The Multi-Casualty Incident (MCI) guidelines are a tool that may be used in part or whole as determined by the on-scene Incident Commander in situations where there are resources required beyond those on scene. If the Incident Commander (IC) determines that additional resources or incident structure is needed to better manage due to the complexity of the incident, he/she shall announce to dispatch that an MCI is being declared. This may be done upon arrival or at any time during the incident.

Positions in an MCI may include:

- Medical
- Triage
- Treatment
- Transportation
- Medical Communications Coordinator

MCI Task Card – Medical

The Medical structure is designed to provide the IC with a basic expandable system to manage multiple patients during an incident. On large incidents, where the IC assigns functions such as Finance, Logistics, Operations and/or Planning, Medical reports to Operations. When an incident can be managed without assigning the Operations function, Medical reports directly to the IC.

Objectives:

1. Coordinate all on-scene EMS activity.
2. Coordinate medical activities with IC and other Incident Command System (ICS) branches as needed.
3. Provide accountability for supervised personnel.

Actions:

- Establish Medical with Command.
- Don appropriate vest for identification.
- Obtain a separate working radio channel for use by Medical.
- Establish the following roles/functions and hand out vest, triage tags and task cards.
 - Triage
 - Treatment
 - Transportation
 - Medical Communications Coordinator
 - Staging
 - Landing Zone
- Order additional resources and ambulances through IC.
- Establish accountability system for personnel working within Medical.
- Refer to [Medical Scene Checklist](#).
- Monitor performance of subordinates. Provide support and changes as needed.

MCI Task Card – Triage

Reports to Medical (use assigned radio channel). Coordinates with Treatment.

Actions:

- Manage the triage function at the incident (should not perform task level triage).
- Don appropriate vest for identification.
- Coordinate personnel/crews performing primary and secondary triage.
- Maintain accountability of all triage personnel/crews.

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- Ensure rapid primary triage is performed – no more than 30 seconds per patient.
- Ensure secondary triage point is established when necessary, or that secondary is accomplished in place.
- Coordinates movement of triaged patients to the treatment/ collection/ transport area. (Order personnel and equipment as appropriate to accomplish this.)
- Ensures appropriate patient triage log is initiated and maintained. (Multiple logs may need to be managed and information integrated depending on the scope of the incident.)
- Relay triage information to Medical and updates status as needed.
- After triage is completed, assists treatment and transport group leaders/teams to locate their patients.

NOTE: *In a hazardous incident, patients may not be able to be triaged until they are removed from the hazard zone.*

Consider having crews utilize triage tags during secondary triage so that primary triage may be performed at appropriate speed.

START Triage System:

Triage and identify patients by category utilizing [Triage Tags](#) and the [START Field Guide](#):

- RED** Immediate life threat (must have rapid transport to survive).
- YELLOW** Delayed (injuries can wait one to three hours before transport).

GREEN Ambulatory (injuries can wait three or more hours before transport).

BLACK Dead (no transport). Move only if needed to reach other live patients.

REFERENCE: [Procedure for using Triage Tags](#)

MCI Task Card – Treatment

Reports to Medical (use assigned radio channel). Coordinates with Triage and Transportation.

Objectives:

1. Rapidly treat and transport all patients.
2. Identify and establish large treatment area(s) to stabilize and care for patients until transported.
3. Coordinate all activities within the treatment area.
4. Coordinate movement of patients from treatment area(s) with Transportation.
5. Provide accountability for personnel working in Treatment.

Actions:

- Establish treatment area(s) large enough to receive estimated number of patients. Set up area with room to expand, if necessary. Provide for environmental protection of victims and allow easy ambulance access and egress. If multiple treatment areas are needed, identify each geographically (e.g. North/South, street name, division name, etc.). See Treatment Area Guidelines.

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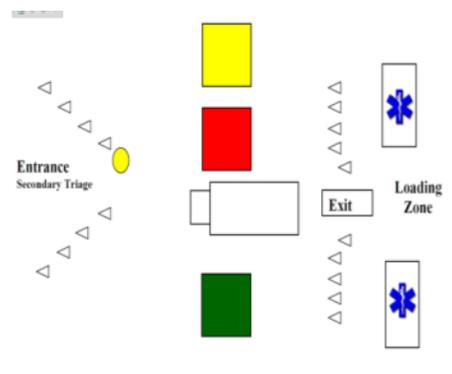
- Don appropriate vest for identification.
- Order additional resources through Medical.
- Clearly identify treatment area entry point. Assign a person at the entrance to conduct primary or secondary triage, attach triage tags (if needed) and direct patients to correct treatment area.
- Consider appointing “Red”, “Yellow” and “Green” Treatment Team Leaders and assign support personnel.
- Establish a medical supply drop area for incoming ambulances and fire apparatus.
- Provide BLS care in the treatment area until resources allow a higher level.
- Ensure all patients in treatment area have been tagged with a triage tag.
- Identify the order in which patients are to be transported.
- Provide accountability for personnel working within treatment area.
- Refer to [Treatment Checklist](#).

Treatment Area Guidelines

- Set up treatment area WELL AWAY from hazards. Consider ambulance access/egress, wind direction and slope.
- Make it BIG. Set up in an area that will allow you to expand.
- Clearly identify entry point and exit point for patient transportation.
- Utilize colored tarps and flags to identify each treatment area.
- Separate the green area from yellow/red area. Consider separating

with Central Lane MCI Trailer or other natural barrier.

- Assign treatment team leaders to each area and identify them with the appropriate colored vests.



MCI Task Card – Transportation

Reports to Medical (use assigned radio channel).

Objectives:

1. Coordinate movement of patients from treatment area with Treatment.
2. Coordinate all activities within the loading zone.
3. Coordinate flow of transport vehicles with staging.
4. Provide accountability for personnel working in Transportation.

Actions:

- Don appropriate vest for identification.
- Establish patient loading zone.
- Establish one-way vehicle access/egress with Staging.
- Request additional resources as needed from Medical.
- Supervise patient movement to loading zone with Treatment.

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- Monitor medical radio channel to estimate number of incoming patients.
- Refer to [Transportation Checklist](#).

MCI Task Card – Medical Communications Coordinator

Objectives:

1. Coordinate hospital destination for patients leaving the loading zone.
2. Maintain the patient transport log (see [Medical Communications Coordinator Form](#)).

Actions:

- Don appropriate vest for identification.
- Establish communications with regional hospitals.
- Confirm MCI has been declared with regional hospitals and Dispatch.
- Provide total number of estimated patients.
- Establish communication with loading zone to receive information on patients ready for transport (e.g. face-to-face, runner, radio etc.).
- When a unit is ready to transport, contact regional hospital. Provide & record the following information:
 - Triage Tag numbers
 - Triage color/category
 - Age/gender
 - Unit number of transporting vehicle
- Confirm hospital destination and record.
- Inform the transporting unit of its destination.

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MEDICAL SCENE CHECKLIST

| Functional Assignments: | Ops: | Order Resources: | Ops: | HazMat: |
|--------------------------------|-------------|-------------------------|-------------|----------------|
| Triage | | Ambulances (specify #) | | Mass Decon |
| Treatment | | Police (Secure Area) | | Safety |
| Transportation | | Buses | | Rescue |
| Medical Communications | | Vans | | |
| Staging Area | | Medical Examiner | | |
| Landing Zone | | Red Cross | | |
| | | Specialty Teams | | |

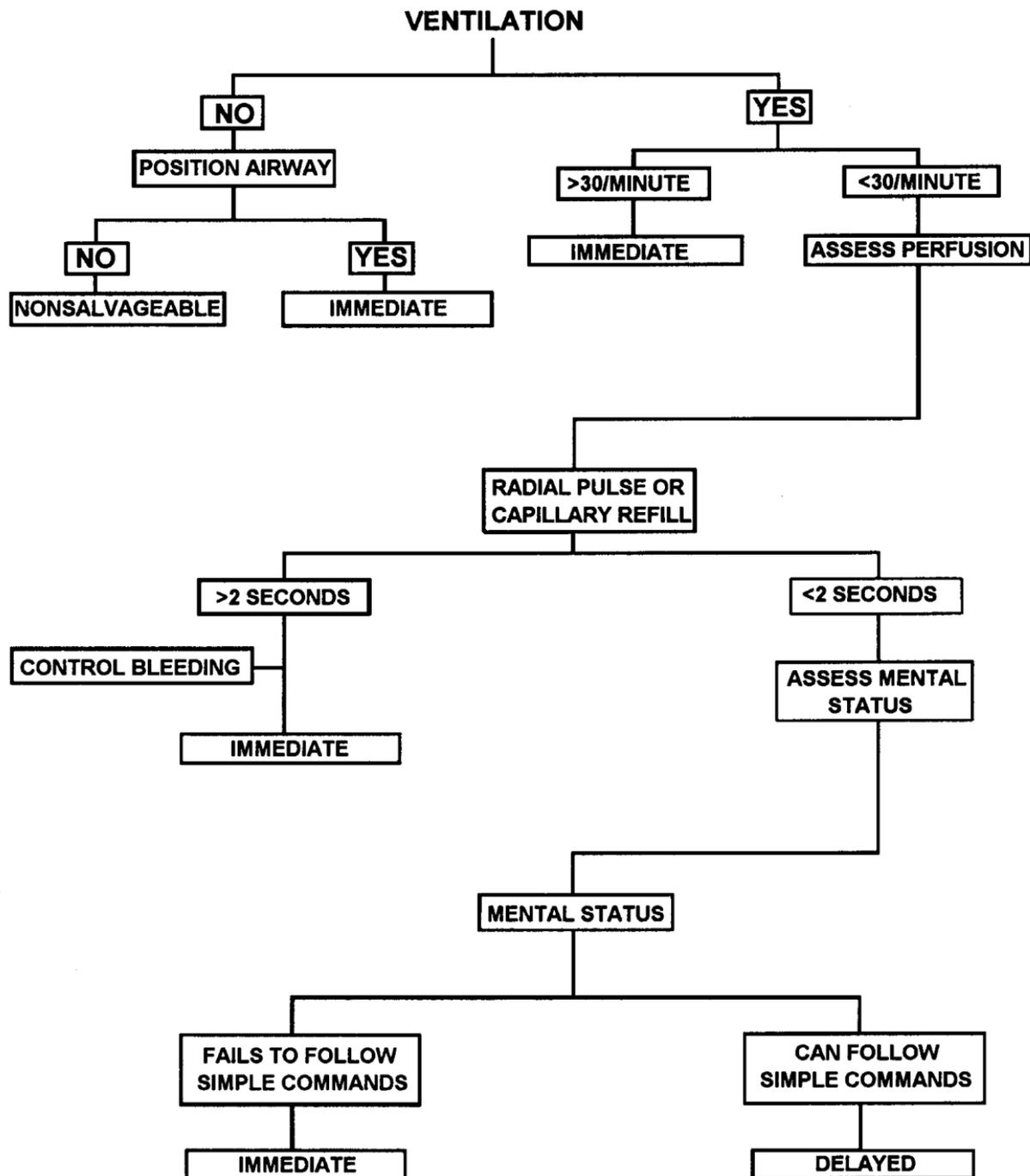
OTHER ASSIGNMENTS

| |
|---|
| Incident Commander |
| Triage |
| Treatment |
| Transportation |
| Medical Communications Coordinator |
| Staging Area |
| Landing Zone |
| |

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START FIELD GUIDE



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TRIAGE TAG

Personal Property Receipt/
Evidence Tag
Destination
Via
TRIASGE TAG
S L U D G E M
AUTO INJECTOR TYPE
AUTO INJECTOR TYPE
Yes No Primary Decks
Yes No Secondary Decks
Sexes
Male Female
VITAL SIGNS
MORGUE
IMMEDIATE IMMEDIATE
DELAYED DELAYED
MINOR MINOR

SAFETY FIRST – Scene Security

- The Disaster Management Systems – All Risk Triage Tag is designed to prompt first responders to consider scene safety and contamination hazards. For this reason, the Tag has been designed with a “CONTAMINATED” strip affixed to the side of the Tag.

The CONTAMINATED strip has 3 main functions...

- **First**, it is designed to prompt the first responder to consider the possibility of hazardous contaminants. If none, simply remove the tab.
- **Second**, it is designed to identify contaminated victims prior to decontamination. The tab is removed from the victim when the clothing is removed and the tab is placed with the clothing in a clear plastic bag.
- **Third**, the tab is designed to identify possible contaminated evidence for law enforcement personnel.

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PROCEDURE FOR USING TRIAGE TAGS

HAZMAT CONSIDERATIONS

CONTAMINATION HAZARD

NO

Remove Contaminated Strip

Initiate START Triage

Treatment / Tracking / Transportation

CONTAMINATED

EVIDENCE

TRIAL TAG

Personal Property Receipt/
Evidence Tag *1234567*

Destination *1234567*

Via *1234567*

TRIAL TAG

S L U D G E M

AUTO INJECTOR TYPE 1 2 3

AUTO INJECTOR TYPE 1 2 3

Primary Injuries

Secondary Injuries

Other

VITAL SIGNS

| Time | B/P | Pulse | Respiration |
|------|-----|-------|-------------|
| | | | |
| | | | |

Time Drug Solution Dose

MORGUE

IMMEDIATE *1234567*

IMMEDIATE *1234567*

DELAYED *1234567*

DELAYED *1234567*

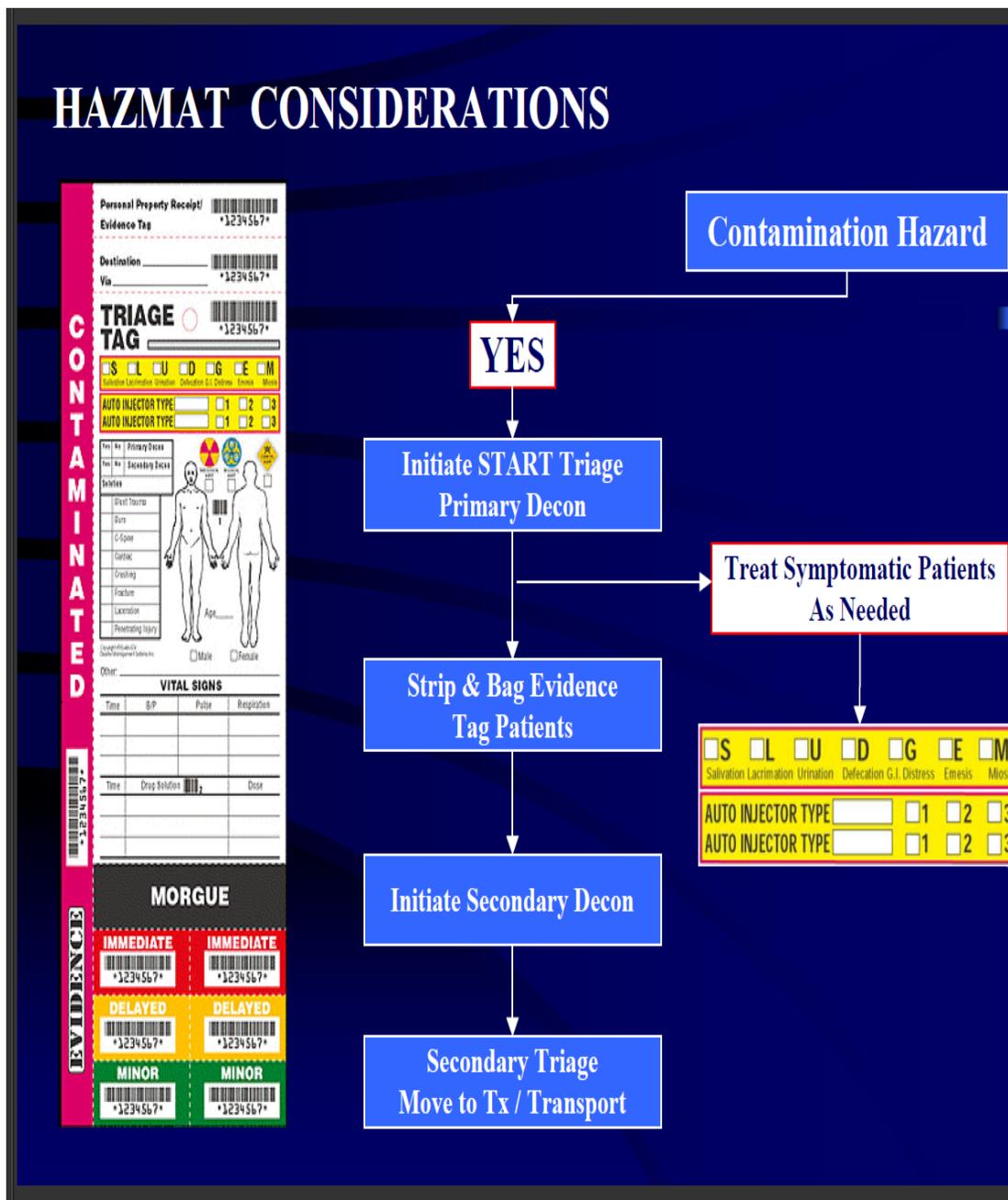
MINOR *1234567*

MINOR *1234567*

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HAZMAT CONSIDERATIONS



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Patient Triage – START Triage

Patients should be triaged utilizing the START triage system. **START** stands for Simple Triage and Rapid Treatment.

The START system is based upon three simple parameters.

- **Respirations** (> or < 30 per minute)
- **Perfusion** (Capillary Refill > or < 2 seconds)
- **Mental Status** (Follow simple commands)

The START triage selection process can be found on the back side of the Triage Tag. The rescuer will check the appropriate boxes that correspond to the patients condition.

mnemonic: **30 – 2 – CAN DO**

| RESPIRATIONS | PERFUSION | MENTAL STATUS |
|---------------------------------------|--|--|
| R <input type="checkbox"/> Yes | P <input type="checkbox"/> + 2 Sec. | M <input type="checkbox"/> Can Do |
| <input type="checkbox"/> No | <input type="checkbox"/> - 2 Sec | <input type="checkbox"/> Can't Do |

| | |
|---|------------------|
| Move the Walking Wounded ▶ | MINOR |
| No Respirations After Head Tilt ▶ | MORGUE |
| <input type="checkbox"/> Respirations - Over 30 ▶ | IMMEDIATE |
| <input type="checkbox"/> Perfusion - Capillary Refill Over 2 Seconds ▶ | IMMEDIATE |
| <input type="checkbox"/> Mental Status - Unable to Follow Simple Commands ▶ | IMMEDIATE |
| Otherwise ▶ | DELAYED |

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Patient Triage – Perforated Tabs

At the bottom of the Triage Tag are perforated colored tear off tabs that corresponds to the patients triage category.

These tabs are perforated both horizontally and vertically.

During triage, the rescuer will tear off and retain (from the right tab row) the appropriate triage category for each patient.

Following the triage process, these tabs will be gathered to assist in determining:

- overall patient count
- transport priority
- resource allocation



Patient Injury / Decontamination

On the front of the Triage Tag is a section for indicating primary and secondary decon. There is also a box for charting the solution utilized in decontamination.

There is a section for checking off major injury categories as well as an anatomical (front / rear) figure to allow the rescuer to illustrate areas of injury, gender, and age.

The Radiological, Biological, and Chemical symbols are utilized to identify the type of agent(s) the patient may have been exposed to.

| | | |
|--------------------|----|-----------------|
| Yes | No | Primary Decon |
| Yes | No | Secondary Decon |
| Solution | | |
| Blunt Trauma | | |
| Burn | | |
| C-Spine | | |
| Cardiac | | |
| Crushing | | |
| Fracture | | |
| Laceration | | |
| Penetrating Injury | | |
| Other: _____ | | |

Age _____

Male Female

An anatomical diagram of a human figure is shown, with a front view and a rear view. The figure is used to indicate areas of injury. Above the figure are three symbols: a red radiation symbol, a blue biological symbol, and a yellow chemical symbol. The figure is also labeled with 'Age' and 'Gender' (Male/Female).

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Patient Vital Signs & Treatment

On the front of the Triage Tag is a section for indicating the patients vital signs and drug / IV therapy.

There is also a section for charting signs / symptoms of Nerve Agent exposure utilizing the SLUDGEM acronym.

Nerve Agent antidote therapy can also be charted in this section with boxes available to chart the drug type (Atropine / 2Pam) and boxes 1 through 3 to chart the number of times each drug was given.

| VITAL SIGNS | | | |
|-------------|---------------|-------|-------------|
| Time | B/P | Pulse | Respiration |
| | | | |
| | | | |
| | | | |
| Time | Drug Solution | Dose | |
| | | | |
| | | | |
| | | | |

S L U D G E M
Salivation Lacrimation Urination Defecation G.I. Distress Emesis Miosis

AUTO INJECTOR TYPE 1 2 3
AUTO INJECTOR TYPE 1 2 3

Personal Property Tab

The Personal Property Receipt is utilized when clothing, jewelry, and other personal items are removed from the patient during the decontamination process.

The Personal Property Receipt should be placed in a clear plastic sealable bag which contains the patients personal belongings.

This allows for the return of property to the rightful owner after ensuring all items have been decontaminated.

The personal property receipt can be tracked by number or bar code.



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Patient Information - Tracking - Transport

On the back side of the Triage Tag is an area for documenting patient personal information.

NOTE: All tear off tabs are printed with identification numbers and associated bar codes which allows for the seamless tracking of patients through triage, treatment, transport, and the hospital phase of patient care.

At the top of the front side of the Triage Tag is a tear-off tab that is utilized for tracking hospital destination and transport mode.

| PERSONAL INFORMATION | | |
|----------------------|-----------------|-----|
| NAME | | |
| ADDRESS | | |
| CITY | ST | ZIP |
| PHONE | | |
| COMMENTS | RELIGIOUS PREF. | |

| | |
|--|--|
| Personal Property Receipt/ Evidence Tag |  *1234567* |
| Destination _____ |  |
| Via _____ | *1234567* |

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TREATMENT CHECKLIST

| OPS Channels | Medical: | Treatment: | Transport: |
|--------------------------------|------------|------------------------------------|------------|
| Assign Treatment Team Leaders | | Current Patients in Treatment Area | |
| RED Team Leader: | | Red | |
| YELLOW Team Leader: | | Yellow | |
| GREEN Team Leader: | | Green | |
| Supply: | | Black | |
| Additional Company Assignments | | Notes: | |
| Company | Assignment | | |
| | | | |
| | | | |
| | | | |
| | | | |

Other Assignments:

| Command | Operations | Triage | Staging | Destination |
|---------------------|------------|------------|------------|-------------|
| OPS: _____ _____ | OPS: _____ | OPS: _____ | OPS: _____ | OPS: _____ |



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MEDICAL COMMUNICATIONS COORDINATOR FORM

