

POLICY: 918.10
TITLE: Alpine County MCI Activation

EFFECTIVE: 8/12/20
REVIEW: 8/2025
SUPERCEDES:

APPROVAL SIGNATURES ON FILE IN EMS OFFICE

PAGE: 1 of 3

ALPINE COUNTY MCI ACTIVATION

I. AUTHORITY

- A. “Casualty” – means a sick, wounded or injured person whose medical condition resulted from involvement in a single geographically focused event.
- B. “Disaster Control Facility (DCF)” means the facility utilized by the responding ambulance provider in their primary response area to monitor capacity and capability and to assume responsibility for directing patient destinations by ambulance during a Multiple Casualty Incident or EMS/Hospital System Saturation.
- C. “Dispatch Agency” – means the entity responsible for providing dispatch services to a first response provider.
- D. “EMResource” - Formerly known as EMSsystems, the web-based program used to provide local government and healthcare professionals a method to receive real time information on the current status of the emergency medical and health system resources.
- E. “EMS Duty Officer” – A Mountain-Valley EMS Agency employee assigned to monitor and perform actions to oversee EMS operational issues as necessary.
- F. “Field Treatment Site (FTS)” – means a designated treatment area established to hold and treat patients at or near the incident location until they can be transported to the appropriate medical facility, either within or outside the Operational Area (OA). The FTS can be pre-designated or on-scene locations.
- G. “Multi-Casualty Incident (MCI)” - means any incident where the number of patients exceeds the day-to-day operating capabilities; requiring additional resources and/or distribution of patients to multiple hospitals.
- H. “MHOAC” – Medical Health Operational Area Coordinator (Coordination Program)
- I. “Mass Casualty Incident” means a single geographically focused event, which produces casualties of a number and severity that exceeds the combination of operational area and mutual aid ambulance transport resources available to respond to the incident.

- J. “Mutual Aid” – A statewide system designed to ensure that adequate resources, facilities, and other support are provided to jurisdictions whenever their own resources prove to be inadequate to cope with a given situation.
- K. “Patient” – Means any individual encountered by Pre Hospital Personnel who demonstrates any of the following:
 - a. Suspected illness or injury
 - b. Involved in an event with significant mechanism that could cause illness or injury
 - c. Requests care or evaluation
 - d. An altered level of consciousness
- L. “Pre Hospital Personnel” – Means any responding personnel with Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), Advanced Emergency Medical Technician (AEMT) and/or Paramedic level certification and/or licensure.
- M. “Triage Tag” – means a tag used by triage personnel to identify and document the patient’s medical condition.

III PURPOSE

The purpose of this policy is to provide Pre Hospital Personnel with additional direction in the event of an MCI. This policy is intended to supplement MVEMSA Policy 810.00 – Multi-Casualty Incident Plan.

IV. POLICY

This Policy defines conditions that activate and manage an MCI in Alpine County.

V. PROCEDURE

A. MCI Pre-Alert

1. Pre-Hospital Personnel pre-alerts their Dispatch Agency or if an ambulance provider their DCF of the potential MCI
2. The following information should be disseminated to the Dispatch Agency or DCF:
 - a. Location of incident
 - b. Source of incident (ie., vehicle accident, fire, hazardous exposure)
 - c. Estimated number of patients
3. The Dispatch Agency will notify the appropriate DCF of the MCI Pre-Alert.
4. The DCF will create an MCI Alert in EMResource, adding the term “Pre-Alert” to the title of the event.

B. Declaration of an MCI

1. An MCI can ONLY be declared by Pre Hospital Personnel on scene

Once an MCI is declared, Pre Hospital Personnel shall notify their Dispatch Agency or if an ambulance provider, their DCF.

2. Consider the following:
 - a. Weather condition limitations (i.e., snow/ice slows response, air ambulance can't be used)
 - b. The number of patients exceeds the available resources
3. An MCI declaration may be canceled by the first arriving paramedic on scene.
 - a. If the MCI is canceled, the Paramedic must document in detail, his/her reasoning for the cancellation on the Agency's MCI Evaluation Tool form, which is located on www.mvemsa.org under the Resources Page and submit to the Agency within 24 hours after incident.

C. Decision Points for the MCI escalating into a Mass Casualty Incident

1. Resource request to the MHOAC due to the exhaustion of mutual aid ground transport ambulances; or
2. Extended field operations for greater than 6 hours; or
3. Need to establishment a Field Treatment Site.
4. If a Mass Casualty Incident is declared the DCF shall notify the EMS Duty Officer at 1-800-945-2273 of the incident

D. Patient Distribution

- 1. All patients shall be tagged with a triage tag when an MCI is declared.**
2. Communication will be made to the DCF for patient destination
3. The following information will be communicated to DCF:
 - a. Patient Status (Immediate, Delayed, Minor)
 - b. Age (Approximate)
 - c. Gender
 - d. Injury Type (ie, Head, Abdomen, Neck)
4. DCF will do the following:
 - a. Update EMResource Notification
 - b. Provide patient destinations to EMS