

**Sacramento County Emergency Medical Services
Out-of-Hospital Providers MCI Critique**

Please complete following all MCIs and drills. Forward by FAX to SCEMS at (916) 875-9711 or mail to SCEMS at the address on the bottom of this form. Questions, call # (916) 875-9753.

Date	Time	Incident Name		
Medical Group Supervisor (MGS)				
Patient Transport Group Supervisor (PTGS)				
No. of patients	No. of transport Vehicles	(Air)	(Ground)	Provider
Immediate	Delayed	Minor	Refused	Deceased
Control Facility (CF) Notification:				
Dispatch previously notified (CF)? Yes No Unknown				
<i>(Check Appropriate response)</i>			Yes	No
Confirm/ cancelled MCI upon arrival at incident.				
Were identification vests worn at scene?				
Were Incident Commander and MGS readily identified?				
Was an ambulance staging area established?				
Were triage tags used?				
Patient destinations received without long wait?				
Problems with the CF and/or Medical Control:				

PLEASE MAIL or FAX TO:

Sacramento County Emergency Medical Services
9616 Micron Avenue, Suite 635
Sacramento, California
95827

