

Region V Emergency Preparedness Coalition
Alternate Care Site Trailer Deployment Plan
June 2018



Contents

	Req	uesting Facility/Organization Checklist	. 4
	Hos	t Facility Checklist	. 5
	Reg	ion V Checklist	. 6
l.	Ir	ntroduction	. 7
	a.	Purpose	. 7
	b.	Definitions	. 7
	i.	Alternate Care Site Trailer (ACST)	. 7
	ii	. Host Facility	. 7
	ii	i. Requesting Facility/Organization	. 7
	c.	Overview of the Plan	. 7
	d.	Anticipated Scenarios	. 8
	e.	Assumptions	. 8
II.	C	Command and Control	. 8
Ш		Roles and Responsibilities	. 8
	a.	Host Facilities	. 8
	b.	Requesting Facility/Organization	. 9
	c.	Resource Management	. 9
	i.	Resource Tracking (Pre-Event)	. 9
	ii	. Resource Tracking (Response)	. 9
	ii	i. Changes in Resource Status Reporting	10
	i۱	v. Resource Maintenance (Pre-Event)	10
	٧	. Resource Maintenance (Response)	10
	٧	i. Transport of the ACSTs	11
IV		Requesting the ACST	12
	a.	Triggers	12
	i.	Opening	12
	ii	. Closing	12
	b.	Procedures for ACST Requests	12
	c.	Procedure for Approval of ACST Request	12
	d.	Conditions of ACS Trailer Requesting and Deployment	
	ii	, , ,	
	i۱		13

v. Resource Demobilization	
e. Staffing	
f. Security	
V. Reimbursement	
Appendices	15
Appendix A: Contact Information	
Appendix B: Notification/Activation Request	23
Appendix C: Forms	24
Appendix D: Inventory of ACSTs	29
Appendix E: Trailer Packing Schematics	41

Requesting Facility/Organization Checklist

- Upon determination of need, make verbal or written request to the Healthcare Coalition Coordinator for ACSTs.
- Submit completed R3 form to Healthcare Coalition Coordinator within 48 hours of a request.
- Maintain communication with relevant partners (e.g., Region V hospital partners, local EOCs and health departments, MDH, and MIEMSS).
- If request is approved, arrange transportation for pair of trailers from host facility to RFO site.
- Ensure on-site area is adequate to store and unload trailers (trailers are 8' by 16').
- Establish and maintain security of trailers.
- Keep track of trailer resources utilized.
- Clean and remove waste from trailers.
- Within 90 days of demobilization, restock supplies that are depleted, lost, or stolen.
- Repair any damage incurred by trailers while in RFO possession.
- Transport trailers back to the host facility.
- Within two weeks of returning the trailer, send forms and an Asset Utilization Report to Region V.
- Request reimbursement from Region V for restocked non-consumable supplies and equipment that are not billed to patients.

Host Facility Checklist

- Make trailers available for Region V inventory and maintenance purposes.
- Provide trailer access to RFO after Region V approval.
- Maintain transportation equipment, including hitch.
- Maintain security of trailers while not deployed to RFO.
- Provide approved RFO with copy of the Resource Tracking Report if requested.

Region V Checklist

- Conduct annual walkthrough and inventory of trailers.
- Produce annual Inventory Report.
- Replace expired supplies and equipment.
- Maintain Resource Tracking Report.
- Ensure that the trailers, supplies, and equipment are maintained, operational, and ready for use, including maintaining funding for these activities.
- When a verbal or written request for the ACST is received, the Healthcare Coordinator (HCC) will immediately forward trailer requests to the Coalition Chair/Co-Chairs.
- The Chair/Co-Chairs may immediately approve the request or first discuss the request with Coalition members, such as in the event of multiple requests or if multiple requests are anticipated.
- If the Chair/Co-Chairs determine a discussion is needed, they will alert Coalition members through Everbridge to the need for a call and discussion.
- Discuss and decide whether to approve a trailer request.
- HCC notifies RFO of decision.
- If request is approved, Coalition notifies MIEMSS and other relevant partners.
- When trailers are returned, note any changes in condition of the trailer and its resources in the annual inventory report.
- Coordinate with RFO and host facility as needed to reimburse for maintenance and resupply.

I. Introduction

a. Purpose

• This plan provides a framework for the activation and management of the Maryland Region V Alternate Care Site Trailers (ACSTs). The trailers help replenish or replace the supplies or equipment of an overwhelmed or damaged requesting facility in order to meet the overall goal of minimizing mortality and morbidity. This document will provide a regional concept of operations (CONOPS) for the maintenance, activation, and management of medical resupply trailers.

b. Definitions

- i. Alternate Care Site Trailer (ACST)
- For the purposes of this plan, "alternate care site trailer" (ACST) refers to two pairs of trailers that the Region V Emergency Preparedness Coalition (Coalition) intends to convey medical supplies and equipment to a requesting facility.





The pair of trailers hosted by UM Laurel Regional Hospital.

ii. Host Facility

 Host Facilities are the facilities that house the ACSTs during all periods other than when being used by requesting facility/organizations.

iii. Requesting Facility/Organization

 Requesting Facility/Organization (RFO) is the facility or organization that is requesting a pair of ACSTs to replenish or replace its supplies or equipment.

c. Overview of the Plan

• In the event of a local, state, or regional disaster or public health emergency, Region V Coalition member facilities may experience a medical surge that depletes the facility's available supplies and equipment, or the emergency may damage, destroy, or otherwise render medical equipment and supplies unusable. The Region V ACSTs provide supplies and equipment to healthcare facilities, including hospitals and alternate care sites. As such, they can be setup quickly and easily deactivated once the surge or emergency has passed. This document contains a template of ACST procedures designed to help the local healthcare system to cope while it is temporarily overwhelmed by a surge of

patients, or if, as a result of the incident, a facility itself is no longer able to function as necessary to meet patient demands. The most basic function of the ACSTs is to augment the surge capacity of Maryland.

d. Anticipated Scenarios

The ACSTs will be used to resupply facilities, such as hospitals and other Region V
 Coalition members, with general medical, trauma care, and administrative supplies and
 equipment when that facility experiences a large influx of patients or has sustained
 damage. Examples include, but are not limited to, an infectious agent or communicable
 disease epidemic, or a catastrophic event (whether natural, such as a hurricane, or
 manmade, such as an act of terrorism.

e. Assumptions

- Healthcare entities are reporting extremely large volumes of patients, whether from a
 disaster resulting in a mass casualty or mass fatality incident, or from a pandemic
 influenza, where patient volume gradually increases, peaks quickly, and remains high for
 a long period of time.
- There will be medical needs that exceed the normal surge capacity of existing healthcare facilities, or absent a medical surge, damage to facility equipment and/or supplies necessitates a resupply.
- In a medical surge scenario, hospital resources will need to be redirected to care for the more seriously ill or injured.
- Supplies for the ACSTs will be acquired using pre-established vendor relationships, contracts, and memoranda of understanding, and local, state and/or regional resource caches, if available.

II. Command and Control

- The ACSTs are the under the ultimate command and control of the Region V Healthcare Coalition, unless superseded by local or state law or emergency powers.
- Once an ACST has been requested and the request has been approved, the trailer comes under the command and control of the RFO, until it is returned to the host facility.
- If, while an RFO has control of the trailer, the Region V Coalition decides that another facility or partner has a need that supersedes the RFO, the Coalition will arrange for the trailer's removal and transport to the new facility.

III. Roles and Responsibilities

a. Host Facilities

As the day-to-day keepers of the ACSTs, host facilities are responsible for the following non-operational oversight of the ACSTs, including:

- Providing access to the Region V Coalition for regular inventory and maintenance;
- Providing access to requesting facilities or institutions upon successful notification;
- Retaining sole discretionary authority to reassume control of ACSTs, should circumstances require; and

• Maintaining hitch and any other equipment (other than the towing vehicle) required to transport the ACSTs.

b. Requesting Facility/Organization

Upon requesting and receiving permission to activate the ACSTs, the Requesting Facility/Organization assumes the following responsibilities and expectations pursuant to operation of the ACSTs:

- The Requesting Facility/Organization is required to fulfill the expectations set forth in this plan;
- The RFO is solely responsible for ensuring that the trailer is returned to the host facility in a comparable condition to that of its arrival. This shall include:
 - Providing appropriate custodial services to clean the ACSTs;
 - Removing any waste, particularly biological, from the trailer following demobilization;
 - Replenishing used, lost, or stolen resources, and obtaining reimbursement from Region V for any necessary replacement of non-consumable resources;
 - Maintaining ACST security for the duration of its operation and ensuring handoff to the approved host facility representative; and
- The requesting facility will maintain constant communications with appropriate partners (e.g., Region V hospital partners, local EOCs and health departments, MDH, and MIEMSS);
- The requesting facility shall operate the ACSTs in accordance with federal, state, and local laws.

c. Resource Management

- Resource Tracking (Pre-Event)
 - The Region V Coalition will ensure accurate recordkeeping for trailer assets housed in the ACSTs during periods of non-activation.
 - The Region V Coalition will produce an annual Inventory Report (Appendix D) that will list ACST inventory, and can also be used in the Resource Management Plan.
 - Inventory Reports shall include:
 - The resource's current location:
 - The point of contact;
 - Any special considerations for storage (i.e., refrigeration); and,
 - Maintenance records for the asset.
 - Changes to the trailer assets should be updated in the Resource Tracking Report (Appendix D) within ninety days of changes to the above outlined parameters.

ii. Resource Tracking (Response)

- The RFO is responsible for resource tracking from the period of time it receives the trailer until the trailers are returned to the host facility.
- When the RFO takes possession of a pair of trailers, the RFO will provide the point of contact to the host facility.

- Within two weeks of returning the trailers to the appropriate host facility, the RFO
 will provide all relevant related to the resource(s) and a Post-Asset Utilization
 Report that includes a summary of:
 - Hours of usage for equipment (if durable medical equipment);
 - Number utilized from a supply (if expendable resource);
 - o Any maintenance completed on the device; and,
 - Any damage incurred by utilization.

iii. Changes in Resource Status Reporting

- The Region V Coalition must ensure that changes in the ACST equipment or supplies are accurately reflected.
- Changes in disposition can include, but are not limited to:
 - Expiration of supplies;
 - o Repairs of equipment that exceed one week;
 - Deployment; or
 - Equipment awaiting service or supplies requiring restock following deployments.

iv. Resource Maintenance (Pre-Event)

- The host facility is responsible for providing security for the trailers while not in use at their respective facilities.
- The host facility and the Region V Coalition will ensure compliance with all local, state, and federal regulations pursuant to grant-purchased equipment and supplies as noted in the Code of Federal Regulations.
- The host facility will ensure that all manufacturer requirements pursuant to safe and effective storage of supplies and equipment are met. This may include, but is not limited to:
 - o Prevention of improper handling; and
 - Theft prevention.
- The host facility will ensure that the trailer is available to approved, requesting facilities 24 hours a day, 7 days a week, and 365 days a year.
- The Region V Coalition is responsible for conducting annual walkthroughs and inventories to ensure that the trailer and all of its supplies and equipment are ready for use, including:
 - Checking expiration dates of supplies and equipment and replacing them when necessary.
 - Checking the trailer for wear and tear to ensure it is operable.
 - Maintaining funding for these activities.

v. Resource Maintenance (Response)

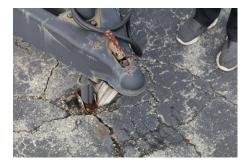
- During an active deployment, the RFO is responsible for providing maintenance, security, and care for the trailer and its equipment and supplies.
- The RFO will ensure compliance with all local, state, and federal regulations.

- The RFO and Region V will ensure that all manufacturer recommendations and reasonable accommodations pursuant to safe and effective storage of supplies and equipment are met during deployment. This may include, but is not limited to:
 - Temperature & Humidity;
 - o Prevention of improper handling; and,
 - o Theft prevention.
- The RFO is responsible for maintaining the ACSTs during activation. The RFO is solely responsible for ensuring that the ACSTs are returned to the host facility in a comparable condition to that of its arrival. This shall include:
 - Providing appropriate custodial services to clean the ACSTs;
 - Removing all waste from the facility;
 - Maintaining appropriate hygiene and appropriate food handling practices;
 and
 - Ensuring the trailer is in good physical condition.
- If the ACSTs are not returned in a comparable condition, the Requesting Facility/Organization may be required to assume any financial costs incurred in returning the facility to its original state.

vi. Transport of the ACSTs

- 1. Who Transports the ACSTs
- Unless otherwise specified, the RFO is responsible for arranging transport of the ACSTs to the RFO's location.
- 2. Required Equipment
- The trailer specifications are the following:
 - The RFO must have a vehicle with sufficient towing capacity to tow the trailers.
 - o Trailer Size: 2 and 5/16"





Trailer hitch.

IV. Requesting the ACST

a. Triggers

i. Opening

The best use of the ACSTs would arise when a requesting facility determines, regardless of scenario, that it will imminently run out of necessary equipment or supplies, or it has already run out of necessary equipment or supplies.

ii. Closing

The ACSTs may be closed when the requesting facility has stabilized its ability to maintain necessary levels of equipment and supplies.

b. Procedures for ACST Requests

- Region V healthcare facilities may request the activation of the ACSTs when they run
 out of a necessary supply, or anticipate imminently running out of a necessary
 supply, as a result of a patient surge, damage to the facility, or other emergency.
- To initiate an ACST request, the RFO must submit a Maryland Region V Regional Request (R3) form to the Healthcare Coalition Coordinator (HCC) (Appendix C).
- Verbal requests may be accepted, but must be followed up with a completed R3 form (Appendix C) within 48 hours to facilitate the approval process.
- Facilities outside of Region V may also request use of an ACST by following these procedures, but priority will be given to facilities within Region V in the event of multiple requests.
- If partners to a duplicate, simultaneous request are unable to settle on an equitable utilization strategy, the Region V Coalition Chair/Co-Chairs shall make a final decision on allocation.

c. Procedure for Approval of ACST Request

- When the HCC receives a verbal or written request, the HCC will forward requests (including written documentation, where applicable) to the Coalition Chair/Co-Chairs.
- The Chair/Co-Chairs must exercise due diligence in determining how to proceed. They may unilaterally approve the request, or if they determine that Coalition member input is necessary, they will send an alert via Everbridge to Coalition members informing them of the immediate need to call in and discuss whether to approve the ACST request. This may be necessary to determine prioritization in the case of multiple requests or if additional imminent requests are anticipated.
- If the Chair/Co-Chairs determine a discussion is necessary: Because time may be of the essence and not all members will be able to call in immediately, the Chair/Co-chairs may determine when the areas affected by the incident are sufficiently represented by the members on the call.
- Members will discuss whether to approve the request.
- If the RFO's request is approved, the Chair/Co-chairs or their designee are responsible for notifying MIEMSS and other relevant partners of the approved request.

Whether approved or denied, the HCC will notify the RFO of the Coalition's decision.

d. Conditions of ACS Trailer Requesting and Deployment

iii. Movement of ACST

- The RFO is responsible for coordinating the transportation of the trailer both to and from the host facility.
- If requested by the RFO, the host facility may assist in deployment of the asset to the RFO, but the RFO may be asked to reimburse any transportation/delivery costs incurred by the host facility.
- If there is a known or imminent threat, resources may be pre-positioned in coordination with the potential RFOs, but resource tracking documentation be maintained.
- At the completion of a resource deployment, the RFO must return the trailer to the
 host facility. However, if the assets are being deployed to a secondary RFO, that
 secondary RFO is responsible for transportation from the facility of the primary RFO.

iv. Resource Utilization

- The ACST and its supplies and equipment will only be used in a manner consistent with all federal, state, and local laws and regulations.
- At the time of deployment, the RFO may request, and the host facility should provide, a copy of the most current inventory to ensure that all equipment has been properly maintained prior to utilization.
- Resources may be utilized for an indefinite amount of time, unless or until:
 - They are recalled for redeployment to another facility in greater need;
 - The condition or significant occurrence necessitating their use has been relieved; or
 - The RFO has had sufficient time to procure or acquire a long-term replacement.



Trailer resources.

v. Resource Demobilization

• The RFO is responsible for returning all equipment and unused supplies to the host facility in a condition comparable to its state when the resource was requested.

- The RFO will ensure that the host facility is available to safely receive the asset before it is returned.
- The host facility will make all reasonable accommodations to receive the returned resources in a timely fashion.
- The host facility and Region V will verify that equipment is in a condition consistent with when it was lent. It will cite any changes in the condition of the resource on the Annual Inventory Report.

e. Staffing

• The RFO is responsible for use, loading, and unloading of the trailers and is expected to provide staffing, including arrangements for the trailer's transport.

f. Security

• Upon receiving the trailers, the RFO assumes responsibility for maintaining safety and security of trailer.



A locked trailer door.

V. Reimbursement

- The RFO is responsible for returning and restoring any utilized asset to a comparable condition to when it was utilized. This includes, but is not limited to:
 - Restocking supplies;
 - Repairing any damage incurred by utilization other than normal wear and tear; and,
 - Replacing any lost, stolen, or missing resources or parts as identified in the Resource Summary Sheets.
- RFO will replace any supply or restore any equipment as rapidly as possible. If the
 replacement period for any supply or equipment is to exceed ninety days after
 demobilization, the RFO will submit, in writing, a formal rationale for the delay and
 suggest a reasonable timeline for completion of the process to the Region V
 Coalition.
- The RFO may seek reimbursement from the Region V Coalition for the replacement of non-consumable items that are not billed to patients.

Appendices

Appendix A: Contact Information

Member Name	Facility/Agency Name	Business Address	Email	Office Number	Cell	24 Hour Contact Phone Number
Alan Savage	JLG-RICA	15000 Broschart Road Rockville, MD 20850	alan.savage1@maryland.gov	301-251- 6829	301-404- 5099	
Antonio Thomas	UM Charles Regional Medical Center	5 Garrett Avenue LaPlata, MD 20646	antonio.thomas@umm.edu	301-609- 4482	301-481- 9793	301-481- 9793
April Brooks	Laurel Regional Hospital, Prince George's Medical Center and Bowie Emergency Center	3001 Hospital Drive Cheverly, MD 20785	april.brooks @dimensionshealth.org		240-351- 8339	240-351- 8339
Betsy Rebert	Montgomery County DHHS PHEP Program	2000 Dennis Ave, Suite 16, Silver Spring, MD, 20902	Betsy.Rebert@montgomerycountymd.gov	240-777- 3033	240-676- 1940	240-676- 1940
Cheryl Newton	Charles County Department of Health	4545 Crain Highway White Plains, MD 20695	cheryl.newton@maryland.gov	301-609- 6770		

Christina Macey	Memorial		CMACEY@CMHLINK.ORG	410-414- 4721	410-703- 7757	410-535- 4000 (Hospital Main Line)
Christy McKendrew	Holy Cross Hospital - Germantown	19801 Observation Drive Germantown MD 20874	christine.mckendrew@holycrosshealth.org	301-557- 6702	518-368- 9822	518-368- 9822 then 301-557- 6061
Cindy Notobartolo	Suburban Hospital	8600 Old Georgetown Road Bethesda, MD 20814	cnotoba1@jhmi.edu	301-869- 3167	301-639- 1676	301-639- 1676
Clark Beil	Montgomery County DHHS	255 Rockville Pike, Suite 100, Rockville, Md. 20850	clark.beil@montgomerycountymd.gov	240-777- 3831	240-832- 6823	703-638- 8909
Corinne Edds	DHMH	300 W. Preston, Ste 202, Baltimore, MD 21202	corinne.edds@maryland.gov	410-767- 8105	443-845- 9928	
Donna Thomas	Charles County Department of Health	4545 Crain Highway P.O. Box 1050 White Plains, MD, 20695	<u>Donnaj.thomas@maryland.gov</u>	301-609- 6761	240-299- 4274	240-299- 4274

Earl Stoddard	Montgomery County Office of Emergency Management & Homeland Security		earl.stoddard@montgomerycountymd.gov	240-777- 2469		
Emily Wagner	Doctor's Community Hospital	8118 Good Luck Road Lanham, MD 20706	ewagner@dchweb.org	301-552- 8026	240-353- 0896	240-353- 0896
Gregory Ford	St Mary's County Health Department	21580 Peabody Street Leonardtown MD 20650	gregory.ford@maryland.gov	301-475- 6701	301-481- 9174	301-873- 7877
Isabel Shephard	Fort Washington Medical Center	11711 Livingston Rd, Fort Washington, MD 20744	<u>IShephard@nexushealth.org</u>	301-203- 2973	301-278- 1757	-
James Marcum	Calvert Memorial Hospital	100 Hospital Road, Prince Frederick, MD 20678	jmarcum@cmhlink.org	410-535- 8314	443-624- 3585	410-535- 4000 (Main Hospital Line)
James Polimadei	John L. Gildner RICA State Facility	15000 Broschart Road, Rockville, MD 20850	james.polimadei@maryland.gov			
Jennie Wallace	MedStar Montgomery Medical Center	18101 Prince Philip Dr. Olney, MD 20832	jwallace@medstarmontgomery.org	301-774- 8755	253-820- 7756	253-820- 7756

Jessica Lynn Pulsipher	' I (anital I I no		beprepared@mncha.org	410-935- 6262		
	Shady Grove Adventist Hospital	9901 Medical Center Drive Rockville, MD	jstoddar@ahm.com	240-826- 6201	301-908- 2731	301-908- 2731
Jim Stoddard	Washington Adventist Hospital	7600 Carroll Avenue Takoma Park, MD	jstoddar@ahm.com	301-891- 5551	301-908- 2731	301-908- 2731
John Skelly	Walter Reed National Military Medical Center	8901 Wisconsin Ave, Bldg 17 Rm B035 Bethesda, MD 20889	john.e.skelly6.civ@mail.mil	301-295- 5202	301-221- 2684	443-994- 3695
Kathy Awkard	MDERS Maryland (NCR)	100 Edison Park Drive, 2nd Floor - Community Outreach section, Gaithersburg, Maryland 20878	kathy.awkard@maryland.gov		301-928- 6340	
Kay Webster	DНМН	300 W. Preston, St. 202, Baltimore, MD 21202	kay.webster@maryland.govkay	410-767- 8826		
Kevin Bussiere	Fort Washington Medical Center	11711 Livingston Road Fort Washington, MD 20744	KBussiere@nexushealth.org	301-203- 3450	757-717- 5221	757-717- 5221

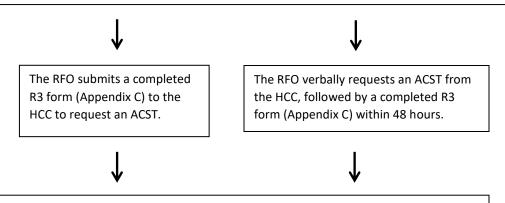
Lauri Cress	Lauri Cress UM Charles Regional Medical Center 5 Garrett Avenue, La Plata, MD 20646		<u>Lauri.cress@umm.edu</u>	301-609- 4453	410-610- 2392	(410) 610- 2392
Mark Arsenault	Montgomery County DHHS, PHEP Program 2000 Dennis Ave, Suite 16, Silver Spring, MD 20902		Mark.Arsenault@montgomerycountymd.gov	240-773- 1204	301-335- 6254	
Meg Usher	Washington 7600 Carroll Meg Usher Adventist Ave, Takoma Hosptial Park MD 209		musher@ahm.com	301-891- 5551	240-608- 5205	240-608- 5205
Melissa Knapp	Walter Reed National Military Medical Center	8901 Rockville Pike, Bethesda, MD 20889	melissa.h.knapp2.civ@mail.mil	301-319- 4906	301-318- 6195	301-295- 4611 x4 Command Duty Office
Michael Cooney	MIEMSS	5111 Berwyn Road College Park, MD 20740	Mcooney@miemss.org	301-850- 6529	443-525- 4515	443-525- 4515
Netta Squires	Montgomery County Office of Emergency Management & Homeland Security	100 Edison Park Drive, Suite 1S31, Gaithersburg, MD 20878	netta.squires@montgomerycountymd.gov	240-777- 2329	240-672- 6879	703-981- 3808
Nick Jarboe	MedStar St. Mary's Hospital	25500 Point Lookout Rd. Leonardtown, MD 20650	nicholas.k.jarboe@medstar.net	240-434- 7746	240-577- 2389	

Phil Raum	MDERS Maryland (NCR)	100 Edison Park Drive, 2nd Floor, Gaithersburg, Maryland 20878 - Community Outreach section	phil.raum@maryland.gov		240-876- 2206	
Preeti Emrick	Laurel Regional Hospital, Prince George's Medical Center and Bowie Emergency Center	3001 Hospital Drive Cheverly, MD 20785	preeti.Emrick@dimensionshealth.org	301-618- 3326/ 301- 497-4784	240-988- 6159	434-607- 5671
Rebecca Hazel	Calvert County Health Department	975 N. Solomons Island Road, Prince Frederick, MD 20678	rebecca.hazel@maryland.gov	410-535- 5400 ext 403	443-771- 5152	443-771- 5152
Rebecca Vasse	MedStar Montgomery Medical Center	18101 Prince Philips Dr. Olney, Md. 20832	rvasse@medstarmontgomery.org	301-774- 8932	443-629- 6223	443-629- 6223
Richard Goddard Prince George's County Health Department		1701 McCormick Drive, Suite 120, Upper Marlboro, MD 20774	Rpgoddard@co.pg.md.us	301-883- 7699	240-691- 7894	240-691- 7894
Roland Berg	Prince Georges County Office of Emergency Management	7915 Anchor Street, Landover, MD 20785	rdberg@co.pg.md.us	301-324- 4400	240-825- 9413	

Rose Cohen	Community Clinic Inc.	8630 Fenton St, Suite 1200 Silver Spring, MD 20910	Rose.Cohen@cciweb.org	301.340.7525 ext. 1185		
Scott Holy Cross Graham Spring		1500 Forest Glen Road Silver Spring, Md. 20910	scott.graham@holycrosshealth.org	301-754- 7108	240-876- 1260	240-876- 1260
Sean O'Donnell	I County DHHS I '		Sean.ODonnell@montgomerycountymd.gov	240-777- 1240	202-489- 1877	202-489- 1877
Sidney Skinner	MedStar Southern Maryland Hospital	7503 Surratts road, Clinton MD 20735	sidney.L.Skinner@medstar.net	301-877- 4629		
Steven Dowell	MedStar St Mary's Hospital	21580 Peabody Street Leonardtown MD 20650	Steven.Dowell@medstar.net	301-475- 6015	240-309- 0706	301-475- 8981
Wanda Montgomery	Amateur Radio Emergency Service (ARES)		ka3ahi@aol.com			
William Harris	DOD		-			

Appendix B: Notification/Activation Request

A facility has run out of a necessary supply or equipment, or anticipates imminently running out of a necessary supply or equipment, because of a patient surge, damage to the facility, or other emergency.



The HCC forwards ACST request to the Coalition Chair/Co-chairs. In the event of multiple requests, the Chair/Co-chairs give priority based on the severity of the situation and, if one or more RFOs is located outside Region V, to RFOs within Region V.



The Coalition Chair/Co-Chairs send an alert to Coalition members requesting their immediate presence on a conference call to vote on the request.



When the Chair/Co-Chairs determine that the affected areas are sufficiently represented by members on the call, the members will vote on the request.



If the request is approved, the Chair/Co-chairs or their designee will notify MIEMSS and other relevant partners of the approved request. Whether approved or denied, the HCC will notify the RFO of the Coalitions decision.

Appendix C: Forms

Maryland Region V Regional Resource Request (R3) Form

	REQUESTOR					
Requesting Facility/Organization (RFO)		Time/Date of Request				
RFO Representative		Proposed Time/Date of Request Pick-up				
RFO Phone #		RFO E-mail				
RESOURCE						
Name of Resource Requested		Resource Code (RMP)				
Type/Kind of Resource		Quantity Requested				
L						
	NE	ED				
Describe the Need (Current level of requested supply, a resource elsewhere)						

Signature of RFO Representative

Date

Mary	land Region V Reso	ource Trackii	ng Report
Record Start Date		Record End Date	
	RESOUI	RCE	
Resource		Resource Code (RMP)	
Maintained Quantity		Current Quantity	
Storage Location			
Point of Contact			
POC Phone #		POC Email	
	MAINTENANC	E HISTORY	
DATE	TYPE OF MAINTENANCE	DATE	TYPE OF MAINTENANCE

		DEPLOYMENT LOG
Deployment #	1	
Quantity Deployed		Quantity Returned
RFO		Quantity Reimbursed
Outstanding Issues (Damage, Reimbursement)		
Deployment #	2	
Quantity Deployed		Quantity Returned
RFO		Quantity Reimbursed
Outstanding Issues (Damage, Reimbursement)		
Deployment #	3	
Quantity Deployed		Quantity Returned
RFO		Quantity Reimbursed
Outstanding Issues (Damage, Reimbursement)		

Maryland Region V Resource Post-Utilization Report

	RESO	URCE	
Name of Resource Transferred		Resource Code (RMP)	
Type/Kind of Resource		Quantity Transferred	
	RF	:0	
Requesting Facility/Organization (RFO)		Time/Date of Transfer	
RFO Representative			
RFO Phone #		RFO E-mail	
	DECOUDED	ANAGENERIT	
	RESOURCE M	ANAGEMENT	
Total Hours Utilized (if applicable)		Total Amount Consumed (if supply)	
Maintenance Done on Resource			
Describe Any Damage to Equipment			
Signature of RFO Represent	tative Upon Return		Date

Signature of Host Facility Representative Upon Return

Date

Appendix D: Inventory of ACSTs

Medical Shelter Component	<u>ltem</u>	<u>Description</u>	Total Units Required	LOCATION: Trailer 1	LOCATION: Trailer 2	Expiration Date	<u>Maintenance</u> <u>Needed</u>
Admin	Dry Erase Board	16 X 24 dry erase w/easel stands	3	boards behind crash carts easels bin 42	(Trailer 1)		
Admin	Band, Patient ID	Vinyl Snap ID Band	2	bin 09	(Trailer 1)		
Admin	Bracelet, Pediatric	Vinyl Snap ID Band	1	bin 09	(Trailer 1)		
Admin	Clips, paper, jumbo		10	bin 02	(Trailer 1)		
Admin	Dry erase markers	Pack of 16 colored	3	bin 02	(Trailer 1)		
Admin	Hi-Lighter, 4 color set		10	bin 02	(Trailer 1)		
Admin	Indelible Markers	Avery Carter Permanent Marker, Click-seal cap extends marker life *Fade-resistant for long-lasting bold color *Chisel tip for line-size flexibility *Black *Certified AP nontoxic *Smudge-resistant ink	50	(10bx) bin 02	(32bx) bin 03 (8) bin 04		
Admin	Pens	Paper Mate Ballpoint Stick Pens *1.0mm medium point for strong sure strokes *High-quality Lubriglide ink for a smoother flow *Nonrefillable	30	(10 bx) bin 02	(20 bx) bin 03		
Admin	Scissors		10	bin 02	(Trailer 1)		
Admin	Staple Remover		4	bin 02	(Trailer 1)		
Admin	Stapler		5	bin 02	(Trailer 1)		
Admin	Staples		5	bin 02	(Trailer 1)		
Admin	Tape dispenser, w/6 rolls of tape		5	bin 02	(Trailer 1)		
Admin	Notepads, White, 100 pages		10	(7) bin 05 (3) bin 06	(Trailer 1)		
Admin	Protectors, sheet, non- glare		4	bin 05	(Trailer 1)		
Admin	Admit form packet	*Extended End-Tab File Folders *8 Tab Chart Divider Set	75	bin 06	(Trailer 1)		
Admin	Clipboards	OIC Hardboard Clipboards, Letter Size, 9" X 12 1/2", Brown	50	(25) bins 03 & 04	(Trailer 1)		
Airway	Oxygen distribution system with outlets	System to include a regulator, ~100 ft oxygen hose, individual regulators or flowmeters every 10 feet to supply oxygen at a minimum of 6 lpm for nasal cannula,15 lpm for nonrebreather and CPAP, and 25 lpm for disposable ventilators (SureVent)	5	3 left front	2 left front		
Airway	Nasogastric tubes - 16F	suction nasal gastric tube, 16 french	1	bin 14	(Trailer 1)		

Airway	EM5461 SureVent disposable ventilator	*Disposable *FIO2 Delivery 100% *Flowrate required 15-40 LPM *Recommended patient's body weight: greater than 40kg (adults) *Ventilatory frequency: 8 to 20 BPM *Adjustable peak pressure range: 20 to 50 cm H20 *PEEP 1/10th of peak pressure: 2 to 5 cm H20 *High pressure relief valve: 60 + 10% cm H2O *Inspiratory resistance: 3 + 1 cm H20/L/sec *Expiratory resistance: 3 + 1 cm H20/L/sec *Dead space: 4 + 3ml *Operating environmental limits: 0 to 122F (-18 to 50 C) *Storage environmental limits: -40 to 140F (-40 to 60 C) *Patient connection: 15mm female, 22mm male *Oxygen source connection: DISS connection/barb fitting *Oxygen tubing connection *Oxygen concentration: Meets ASTM standard F920-93, > 8502 *Approximate dimensions: 8.5" x 3.3" x 2.5" (21.6cm x 8.4cm x 6.4cm) *Approximate weight: 4 ounces (110 +10 grams)	2	Trailer nose-right front	(Trailer 1)	Jan-18	
Airway	Bag, AMBU Adult	Spur II Resuscitator	5	crash cart	(Trailer 1)		
Airway	Bag, AMBU Child	Spur II Resuscitator	2	crash cart	(Trailer 1)		
Airway	Bag, AMBU Infant	Spur II Resuscitator	2	crash cart	(Trailer 1)		
Airway	Suction unit	Impact Suction Unit	2	crash cart	(Trailer 1)		Biomed Review & maintenance
Airway	Lubricant, water soluble	personal lubricant	25	crash cart	(Trailer 1)		
Airway	EM385 Disaster Airway management kit	1 Container to Contain Entire Kit: *2-Res-Q-Vac Suction Unit *2-Tube Check *2-KY Lubricant, 4 oz *1-Nasopharyngeal Airway Kit, contains 6 airways (1 each: 22fr, 24fr, 26fr, 28fr, 30fr, 32fr) and Lubricant *3-Oropharyngeal Airway Kit, contains 4 airways (1 each: 40mm, 60mm, 80mm, 100mm) *2-Rusch Lite Blade Kit or equivalent *Asherman Chest Seal or equivalent *1-LSP Oxygen Manifold (10 LPM) or equivalent *4-sets Each of ET Tubes Non-cuffed (6 tubes one of each: 2.5, 3.0, 3.5, 4.0, 4.5, 5.0) *4-sets each of ET Tubes cuffed (9 tubes one of each: 6.0, 7.0, 8.0) *4 sets each of 3-10cc syringe w/o needle *4 sets of nasogastric tubes *2-oxygen regulators all brass, constant flow (12 position with 2 DISS outlets) *4-oxygen bottles with wrenches *4-bag valve mask (adult) *1-bag valve mask (pediatric) *2-nebulizer masks (adult) *20-non-rebreather masks (adult) *12 - non-rebreather masks (pediatric) *20 nasal cannulas (adult) (page 105 in 2009 catalog)	1	bin 41,24,25 27,28,29,30	bin 40	ET Tubes	Oxygen Bottles need to be filled

Facility	EM371-e Disposable Linen Sets for Surge Beds	Fitted Sheet, patient privacy flat sheet, pillow, pillow case, and quilted blanket	200	30 sets v nose	170 sets v nose	
Facility	Paper towels (C-Fold) packaged in a box	White c-fold paper towels	1	front v-nose	none	
Facility	Bag, Infectious waste	33 gallon bag	2	(250)bin 36	(250)bin 28	
Facility	Fluid spill kit	OSHA, CDC and state recommended items for this kit including biohazard bag, antimicrobial hand wipe, sanicloth germicidal towelette, packet of RED Z Fluid Control Solidifier, 1 combo scoop/scraper, 1 pair latex gloves	20	bin 43	(Trailer 1)	
Facility	Hospital disinfectant spray bottle	*32 oz Spray bottle	6	bin 36	(Trailer 1)	
Facility	Bungy cords	Task Force	10	bin 40	(Trailer 1)	
Facility	Cable ties	GB Electrical	4	bin 40	(Trailer 1)	
Facility	Ponchos Rain	Rain Ponchos for Staff	25	bin 37	(Trailer 1)	
Facility	Rope, nylon	100'	10	bin 40	(Trailer 1)	
Facility	Tape, Duct (multi-colored)	2" 3M	10	bin 37	(Trailer 1)	
Facility	Tape. Electrical (<u>multi-</u> <u>colored</u>)	Scotch 3/4" Colors to match functional areas	10	bin 37	(Trailer 1)	
Facility	Table Lamps	Battery Operated	4	(2) bin 38	(2) Bin 8	
Facility	Dust pan and brush	*Interlocking brush and dust pan *Split-tip fibers on brush *8" wide dust pan of all-plastic construction won't rust or crack *Convenient hang hole	2	bin 40	(Trailer 1)	
Facility	Trash liners, red plastic (large)	Manufactured from high density polyethylene (1.5 mil thick) for sterilization at +250 F (+121 C) and incineration; bags are bright red with biohazard symbol; includes sterilization indicator patch	50	bin 40	(Trailer 1)	
Facility	EM991 Surge Bed	21"H X 33"W X 83"L patient cot; 5 position headrest adjustments and detachable IV pole; 2 Trendelenburg adjustments; 2" eggcrate mattress padding, flame retardant; 500 lb. weight capacity	50	center - 2 sets	center - 3 sets	
Facility	EM999 Surge Bed Cart (10 beds each)	Rolling carts hold up to 10 beds per rack; 3" casters swivel in front for easy maneuvering; 37.25"W X 43.5"L X 75"H Height dimension is critical for transport and manueverabilty through doorways and trailers)	5	center- 2 sets	center 3-sets	

Facility	Chairs	*Chairs: Heavy-duty 7/8" tubular steel frame is strong yet lightweight *Two leg braces for maximum strength and durability *Generous 15 3/4" and 15 3/4" seat with deluxe 1 1/2" cushioned seat *Durable touch texture finish *Non-marring leg tips *10 Year limited warranty	12	left side between bin racks and bed racks	left front(6)	
Facility	Refrigerator	2.8 Cubic feet compact refrigerator	2	right front	right front	Biomed Review and Maintenance Recommended
Facility	Crib	*For children up to 30 lbs, 34" and unable to climb out on their own *mesh on all 4 sides *sets up in less than 1 minute *weighs less than 25 lbs *polyester pad	2	left nose-on top of medical carts	trailer nose	
Facility	Water cooler electric	Tabletop water cooler uses 2-, 3- or 5-gallon bottles (not included) and features a in cup dispenser and removable drip tray; Silent thermoelectric technology; convenient drain plugs for hot and cold reservoirs; child safety guard; 15-1/4Hx12-3/4L"	3	right front (1)	right front (2)	Biomed Review and Maintenance Recommended
Facility	Portable File Boxes	*Bankers Box Quick Store, 10 1/4" H X 12" W X 15 1/4" D *Letter/Legal size	6	lesft top of bin racks	(Trailer 1)	
Facility	Privacy Screens (L64" x W30" x 6ft Tall) 3 panel on casters flame-retardant	L 64" X W 30 x 6 feet Tall	3	left side between bin racks and bed racks	(Trailer 1)	
Facility	Litter Stand	Pre Hospital Litter Stand	4	Left rear	(Trailer 1)	
Facility	Battery alkaline - AA	8 pack batteries	6	bin 42	(Trailer 1)	
Facility	Battery alkaline - AAA	16 pack batteries	3	bin 42	(Trailer 1)	
Facility	Battery alkaline - C	12 pack batteries	4	bin 42	(Trailer 1)	
Facility	Battery alkaline - D	12 pack batteries	4	bin 42	(Trailer 1)	
Facility	Flashlight	Task Force Industrial	25	bin 42	(Trailer 1)	
Facility	Power Cord - 100 ft	Woods 14-3	6	box- right front	(Trailer 1)	
Facility	Power Cord - 50 ft	Woods 13 AMP	6	box- right front	(Trailer 1)	
Facility	Power Outlet Box 4-outlet	Tasco	12	box- right front	(Trailer 1)	
Facility	Bolt Cutter	Standard Bolt Cutter	1	door mount right	(Trailer 1)	
Facility	Tool (Ax) Small	Small Ax	1	door mount right	(Trailer 1)	
Facility	folding table 2 x 4	Standard Folding table for staff, intake	6	right v-nose (3)	left v-nose (3)	
Facility	Wet/dry vacuum	6 Gallon, Portable Wet/Dry Vac	1	right rear	(Trailer 1)	
Facility	Mop with bucket	*31 quart mop bucket & wringer *Use with up to 32 oz mops *12 oz Cotton Deck mop	1	right rear	(Trailer 1)	

Facility	Push broom	*24" wide push broom with natural, palmyra fibers *Durable 60" steel handle *5 year warranty	1	right front	(Trailer 1)	
Facility	Generator 17.5, Kw	17.5 KW with multiple ports and 100 ft extension cord for remote loc	1	rear	(Trailer 1)	Need battery trickle charged and gas supplied
Facility	Tool kit	EMS Customer Kit	1	right front floor by door	(Trailer 1)	
Facility	1200 Watt Microwave oven	2.0 cubic feet countertop unit	1	right front	(Trailer 1)	
Facility	Fans	two large floor standing fans	2	left rear	(Trailer 1)	
Facility	Trash can w/pop lids (biologic), large; disposable	step on wastebasket -white; easy to use step on lid opener	2	left rear	(Trailer 1)	
Facility	EM1028 Military Style Oversized Cot	82"L x 32"W x 18" H 350 lbs for staff needing to spend the night.	25	(7) under rack	(18) under racks	
Facility	Hospital disinfectant 1 gallon		3	under racks	(Trailer 1)	
Hygiene	Bath towel, Disposable	Disposable bath towel	10	v-nose 4 cs	(60)bin 33	
Hygiene	Facial Tissue, individual patient box	facial tissue, 50 sheets/box	50	(Trailer 2)	bin 41	
Hygiene	Urinals	Translucent white plastic urinal has handle designed for easy holding or bedside hanging. Attached lid helps prevent spilling, reduces odors measures to 32oz (960ml)	25	bin 13	bin 24	
Hygiene	Hand cleaner, waterless alcohol-based; 4 oz bottle	Instant hand sanitizing lotion	6	(96) bin 22	(48) bin 16	
Hygiene	Diapers - Infant	Size 1 with leak guard	2	(240) bin 32	(240) bin 54	
Hygiene	Diapers - Pediatric	Size 5	2	(144) bin 34	(144)Boxed in nose	
Hygiene	Toothbrush	Soft tuff toothbrush	4	bin 37 (1cs)	(3 cs) bin 42	
Hygiene	Toothpaste	1.5 oz toothpaste	48	bin 37 (1cs)	(3 cs) bin 42	
Hygiene	Insect Repellant	10 hour insect repellant 2oz	50	(25) bin 22	(25) bin 43	
Hygiene	SunBlock SPF 30	SunX sunscreen 4 oz	5	(30)bin 22	(30) bin 43	
Hygiene	Contact Lens Solution	Alcon Lens Solution 4oz	20	bin 21	(Trailer 1)	
Hygiene	Sanitary pads (OB pads)		5	bin 14	(Trailer 1)	
Hygiene	Basins, bath	plastic, 6 quart	50	(25) bin 43	(25) bin 31	
Hygiene	Bedpans - regular	plastic bed pan saddle shape and high rolled front is designed for patient comfort	50	(25) bin 44	(25) bin 32	
Hygiene	Chux protective pads	Disposable Protective Pad	10	(100)bins 33	(200) bin 01, (200) bin 02	
Hygiene	Baby wipes	Pop up canister baby wipes	12	crash cart (4)	boxed in nose	
Hygiene	Washcloths, disposable	Disposable and highly absorbent washcloths	1500	v-nose 1 cs	bin 58,59,60	

Hygiene	Bathing supply, prepackaged	Premium pre-moistened needle punch cleansing and bathing washcloths with aloe; Hypoallergenic, alcohol free, latex free; soft to the skin, accordion folded for easy dispensing; mild scent	250	(192)boxed in v nose	(8) bin 34		
IV Admin	Alcohol pads (multiple widespread use)	Topical Antiseptic/Anti infective Saturated w/70% isopropyl alcohol, gamma sterilized to meet AAMA/ANSI/ISO 11137 Standards - Non woven pad, 1-3/4" x 3-1/4" - Large	6	bin 07	(Trailer 1)		
IV Admin	Intermittent IV access device (lock)	Intermittent Injection site w/male luer connector	4	bin 07	(Trailer 1)		
IV Admin	IV catheters, 18g w/protectocath guard	Push off plate on the hub, transparent iso standard color coded hubs embossed with catheter size, locking bevel indicator, sharp needle bevel, rounded catheter tip, safety clip automatically engaged when the needle bevel exits, allows preattachment of a syringe to the IV catheter	1	bin 07	(Trailer 1)		
IV Admin	IV catheters, 20g w/protectocath guard	see above	1	bin 07	(Trailer 1)		
IV Admin	IV catheters, 22g w/protectocath guard	see above	1	bin 07	(Trailer 1)		
IV Admin	IV start kits	Includes 1 Tegaderm IV Dressing (6cmx7cm), 1 ea impermeable drape, 2 2"x2" gauze sponges, 2 ea alcohol wipes, 1 ea PVP-iodine prep, 1 ea latex free tourniquet, 1 ea transpore tape 36", 1 ea ID label - Latex Free	1	bin 07	(Trailer 1)		
IV Admin	Needles, Butterfly, 23g		1	bin 07	(Trailer 1)		
IV Admin	Needles, Butterfly, 25g		1	bin 07	(Trailer 1)		
IV Admin	Needles, sterile, 18g	18g X 1"	2	bin 07	(Trailer 1)		
IV Admin	Needles, sterile, 21g	21 g X 1"	2	bin 07	(Trailer 1)		
IV Admin	Needles, sterile, 25g	25g X 1"	2	bin 07	(Trailer 1)		
IV Admin	Saline for injection	Saline for injection (0.9% NS pre-filled syringe)	3	bin 07	(Trailer 1)	Mar-15	
IV Admin	IV arm boards	Disposable Padded Armboards, comfortable foam padding, dielectrically sealed to prevent bacterial /fluid infiltration 2x6	1	bin 08	(Trailer 1)		
IV Admin	Pediatric IV arm boards		1	bin 08	(Trailer 1)		
IV Admin	IV tubing with Buretrol drip set for peds	83", 10 drop. Non-vented spike with drip chamber, roller clamp, AMSafe needleless injection site, and rotating male luer lock.	1	bin 09	(Trailer 1)		
IV Admin	IV tubing with standard macrodrip set for adults	83", 60 drop.	1	bin 10	(Trailer 1)		
IV Admin	Sharps disposal containers - 1.7 quart	1.7 quart Latex Free	8	(4) bin 8	(4) bin 18		
IV Admin	Syringes, catheter tip 60cc	60cc clear syringe barrel; bold, precise scale markings; does not include needle	1	bin 15	(Trailer 1)		

IV Admin	Syringes, insulin	Ground and honed with a unique double-bevel design to provide a comfortable injection. Think wall and Ultra-thin wall needles provide more comfort with an increased flow rate.	1	bin 15	(Trailer 1)		
IV Admin	Syringes, TB	Ground and honed with a unique double-bevel design to provide a comfortable injection. Think wall and Ultra-thin wall needles provide more comfort with an increased flow rate.	1	bin 15	(Trailer 1)		
IV Admin	Syringes, 12cc, luer lock	Clear Syringe Barrel; Bold, precise scale markings; peel-pack plastic blister package, tamper evident for assurance of sterility #3, 12cc	4	bin 15 (1cs)	bin 19 (300)		
IV Admin	Syringes, 3cc, luer lock, w/21g 1.5" needle	Ground and honed with a unique double-bevel design to provide a comfortable injection. Think wall and Ultra-thin wall needles provide more comfort with an increased flow rate.	4	bin 15 (200)	bin 20 (200)		
IV Admin	IV Fluid Bags, NS, 1000CS	.9% Sodium Chloride 1000 ML	4	under racking system	(Trailer 1)	Sep-15	
Logistics	EM390 Custom Bin Racking system	Rack System with recessed clear bins, labeld, color coded and custom labeled and installed in 16ft trailer(30 bins)	2	rack	rack		
Logistics	EM391 Custom Bin Racking system	Rack System with recessed clear bins, labeld, color coded and custom labeled and installed in 16ft trailer(20 bins)	2	rack	rack		
Logistics		packing/drawings/labeling/schematic & manual binder	2	door mount right	door mount right		
Logistics	16ft x8.5 ft trailer	Trailer Description and detail on separate sheet. Fully packed and delivered with bin racking systems and labeled according to function and listing all items on bins on on load plan in binder with CAD layouts	2	trailer	trailer		
Logistics	EM2005 Megaphone	25W of power with a 115 db siren *900 ft of clear, crisp voice projection *Whistle, Yelp, Wail and Hi-Lo sounds *Revolver switch for selecting sounds *Comfortable pistol grip with press-to-talk switch *Feedback suppressing circuitry *Includes shoulder strap for easy carrying *Durable plastic construction *Uses 8 C-cell batteries	2	bin 01	(Trailer 1)		

Logistics	EM2164 FRS Radios	*MicroTalk FRS/GMRS 2 Way Radio two pack with up to 6 mile range *UHF/FM *6mile range *22 Channels *38 Privacy Codes *Battery Saver Circuitry *Scan feature *Key Lock *5 Call Tones *Roger beep Tone (selectable) *Auto Squelch *Maximum Range Extender *Illuminated LCD *Keystroke Tone Signal *Speaker/Microphone Jack *Belt Clip *1 Year warranty (on radios) *Unit Dimensions 5.69"H X 2.33"W X 1.38"D including antenna *Unit Weight 2.82 oz. *RF Output 1	4	bin 01	(Trailer 1)	
Logistics	EM362 Visual	Pictures, Sign, language, and spanish	10	bin 01	(Trailer 1)	
Logistics	Communications Board HICS VESTS 79	translation of pictures, pain scale etc. Complete set with reflective stripes	1	(yell,blue,green) bin 11 (black,red) bin 12	(Trailer 1)	
Logistics	Spare Tire		1	Right rear	Left Rear	
Logistics	Mirror Extensions		2	right front	right front	
Logistics	Swaybars & towing ball		2	right front	right front	
Medical	Battery Pack with Defibrillation Pads	Standard Battery Pack with 9V lithium	2	crashcart	bin 27	
Medical	N-95 mask	Shell protects the filter media so it stays cleaner looking longer; resists collapsing so it holds its shape longer; no metal nose band to adjust	2	v-nose	(100)bin 48 (100) bin 49	
Medical	Board splint 24" cardboard padded	splint cardboard with foam 24"	20	right top of bin racks	(Trailer 1)	
Medical	Gown, patient	Apex™ economical lighter weight TPT gown, reversible, front/back opening; 32" x 42"	2	(Trailer 2)	bin 44, 45	
Medical	EM62 Mesh stretcher	*Lightweight foldable stretcher *Holds up to 500 lbs. *Two integral velcro patient straps *Carrying case	2	below racks	(Trailer 1)	
Medical	EM7117 OB Kits	*Everything necessary for an emergency birth *all items are disposable *Kit includes: 1 non-latex exam gloves/pair, sterile; 1 disposable scalpel, sterile; 1 plastic lined underpad; 4 gauze sponge, sterile; 2 umbilical clamps, sterile; 1 plastic placenta bag with ties; 1 OB pad, sterile; 1 receiving blanket; 3 non-woven towels; 1 bulb syringe, sterile; 1 plastic apron; 1 OB towelettes; 1 B2K towelette; 1 Apgar scoring chart	1	bin 14	(Trailer 1)	
Medical	Povidone-iodine bottles, 16 oz	Povidone-Iodine Kills Fungi, Nonstinging	6	bin 14	(Trailer 1)	
Medical	Emesis Basins	Plastic emesis basin is designed for easy handling *9" length and 500 cc capacity with graduated cubic centimeter markings	50	bin 15	(Trailer 1)	
Medical	Gauze pads, non-sterile, 4" X4" tube roll	sponge, gauze, non-sterile, 4"x4", 12 ply	8	bin 20	(Trailer 1)	

Medical	Gauze roll, 3" non-sterile	bandage, conforming, stretch, non- sterile 3"x4.1yd	4	bin 21(192)	bin 15 (192)	
Medical	Tape, silk - 1 inch	A "Silk-like" tape with a hypo- allergenic adhesive with high strength and adhesion. An excellent, general-purpose tape that is easy and economical to use' tears in two directions for convenient ease use; breathable to allow skin to function normally	8	(48) bin 23	(48) bin 22	
Medical	Tape, silk - 2 inch	A "Silk-like" tape with a hypo- allergenic adhesive with high strength and adhesion. An excellent, general-purpose tape that is easy and economical to use' tears in two directions for convenient ease use; breathable to allow skin to function normally	7	(21) bin 23	(21) bin 22	
Medical	Cold pack	4" x 6"	2	(24) bin 23	(24) bin 30	
Medical	Medicine cups, 30ml, plastic	pliable, unbreakable, & easy to read	7	bin 23	(Trailer 1)	
Medical	Foley Catheters - 16F Kits (includes drainage bag)	16 Fr. 5 cc with urinary drainage bag	3	(10) bin 26	(30) bin 09	
Medical	Tape, Coban, 1"	3M Coban Tape	3	(45) bin 31	(45) bin 23	
Medical	Tape, Coban, 4"	3M Coban Tape	3	(27) bin 31	(27) bin 25	
Medical	Gown, patient	Apex™ economical lighter weight TPT gown, reversible, front/back opening; 30" x 42"	2	(50) Trailer nose	(50) bin 53	
Medical	Pack, Warm	5x7 hot compress	4	(24) bin 31 (3) bx trailer nose	(24)bin 25	
Medical	Surgical Gloves (Sterile)	Multiple sizes boxes (recommend quantity) 3 sizes Sm/Md/Lg	3	bin 39	(Trailer 1)	
Medical	Restraints, Extremity, soft adult	Extremely Strong. Soft foam velcro closures.	10	bin 21	(Trailer 1)	
Medical	Morgue Kits	body bag with toe tag, clear liner & RF sealed	10	bin 45	(Trailer 1)	
Medical	Gloves, non-sterile, extra- large (non-latex)	nitrile powder-free exam gloves, standard blue - XL	10	(5)bins 16	(5) bin 11	
Medical	Gloves, non-sterile, large (non-latex)	nitrile powder-free exam gloves, standard blue - large	10	(5) bins 16	(5) bin 12	
Medical	Gloves, non-sterile, medium (non-latex)	nitrile powder-free exam gloves, standard blue - medium	10	(5) bins 17	(5) bin 13	
Medical	Gloves, non-sterile, small (non-latex)	nitrile powder-free exam gloves, standard blue - small	10	(5) bins 17	(5) bin 14	
Medical	Surgical Mask	Ear Loop Mask - latex free	1	crash cart & boxed in nose	(300)bin 21	
Medical	ABD bandage pads, sterile; 8" x 10"	8" x 10"	4	(trailer 2)	bin 26	
Medical	EM8165 AED	AED, 1-Adult Pad-Pak, and 1 Pediatric Pad-Pak (Pak includes one-time use battery and electrodes)	2	bin 19	bin 27	Biomed Review and Maintenance Recommended
Medical	Adult BP Cuff		2	crash cart	(Trailer 1)	Biomed Review and Maintenance Recommended

Medical	BandAids	1" x 3" sheer strips	2	crash cart	(Trailer 1)		
Medical	Caviwipes	Boxed Caviwipes	10	(8) bin 18 (2) bin 19	(Trailer 1)		
Medical	EM34 5-Patient trauma kits	Each kit includes: *1 nylon case *10-5"X9" surgipads *1 mouth barrier device *1-3" ace bandage *2-thermal blankets *1-biowaste bag *5-triple antibiotic ointment *2-mask/eye shield *1-Vaseline dressing *1-4 oz. eye wash *20-4" X 4" gauze pads *10-1" X 3" band-aids *4-4" kling bandages *4-triangular bandages *1-1" tape roll *2-cold packs *4-eye pads *1-bulb syringe *2-#3 airway *2-#4 airways *12-gloves *1-penlight *1-scissors	4	crash cart	(Trailer 1)	Eyewash, vaseline dressing, triple antibiotic ointment	
Medical	Large Adult BP Cuff		2	crash cart	(Trailer 1)		Biomed Review and Maintenance Recommended
Medical	Multi-trauma dressing	12" x 30", sterile	1	right front v-nose	(Trailer 1)		
Medical	Pediatric BP Cuff		2	crash cart	(Trailer 1)		Biomed Review and Maintenance Recommended
Medical	Suture Kit	ER Laceration Tray with instruments	1	crash cart	(Trailer 1)		
Medical	Triangular bandage with pins	individually packaged with two safety pins for easy use, constructed of muslin, 36: x 36" x 51"	3	crash cart	(Trailer 1)		
Medical	Vaseline dressing 3" x 9"	Gauze occlusive 3" x 9"	2	crash cart	(Trailer 1)		
Medical	Otoscope/ophthalmoscope set	*Pocket Otoscope *2.5v halogen light *Fiberoptics *Wide angle, removable 2.5x viewing lens *Sealed system with included insufflator *ear specula in 2.5mm and 4.0mm sizes *Pocket clip with integral on/off slide switch *5 each 2.5mm and 4.0mm specula *Pocket Ophthalmoscope *2.5v halogen light * 5 aperture selections *17 lenses from -20 to +20 diopters *Illuminated dial *Built-in lens dust cover *Rubber brow rest *Pocket clip with integral on/off slide switch *Lifetime quality performance guarantee on optics	2	crash cart	(Trailer 1)		Biomed Review and Maintenance Recommended
Medical	Pocket Doppler		1	crash cart	(Trailer 1)		Biomed Review and Maintenance Recommended
Medical	Scissors, stethoscope, pen light belt pack	Emergency response holster to hold a dual head stethoscope, EMS Deluxe shears, 5 1/2" bandage scissors, 5 1/2" straight Kelly forceps, 4 1/2" straight iris scissors, 4 1/2" splinter forceps and a disposable pen light	24	crash cart	(Trailer 1)		
Medical	Siemens Pocket Ultrasound	For Triage and FAST exam, ACUSON P10 Pocket Ultrasound	1	crash cart	(Trailer 1)		Biomed Review and Maintenance Recommended

Medical	Wireless Telemetry	Wireless EKG and Telemetry system for 8 Patients (NH)	1	Trailer nose	(Trailer 1)	Biomed Review and Maintenance Recommended
Medical	Carts: medical supplies	5-Drawer red key lock cart with handle	2	left front	(Trailer 1)	
Medical	Carts: supply, iv and meds, crash	5-Drawer red key lock cart with handle	2	left front	(Trailer 1)	
Medical	Probe covers for thermometers	Probe covers	8	crash cart	(Trailer 1)	
Medical	Scanning Thermometer	No Touch hand held scanning infrared thermometer	4	crash cart	(Trailer 1)	Biomed Review and Mantenance Recommended
Patient Transport	EM450 Patient transport device	1000 Denier Nylon w/8 Carrying handles, 4 continuous 2" webbing strap, ends tapered and cupped to fit patients feet and head 500 lb capacity, carries patient in sitting or lying position, weighs 3 lbs	10	crash cart	(Trailer 1)	
Patient Transport	Stryker Evacuation Chair	Evacuation Chair in Canvas Cover	1	right rear	(Trailer 1)	
Patient Transport	Wheelchair	Chrome Steel Framed Wheelchair w/Fixed Full Arm, Fixed Footrests	3	left front	(Trailer 1)	
Patient Transport	Backboard, plastic	*Length: 71" *Width: 15.75: *Depth: 1.85" *Weight: 15.25 lbs. *Capacity: 500 lbs. *Material: High- density polymer	2	left rear	(Trailer 1)	
PPE	Goggles, splash resistant, disposable	chemical splash/impact goggle	6	crash cart	(Trailer 1)	
PPE	Gown, splash resistant, disposable	isolation gown, elastic cuffs, ties neck/waist, universal	4	top of crash cart (2cs)	bin 46,47	
Special Needs	Diapers - adult	Large, Hips: 44"-54", Weight: 170- 260 lbs, Waist: 38"-50"	4	(36) bin 35	(36)bin 50 (36) bin 51 (36) boxed	
Special Needs	Single use shielded lancets	Puncture device is shielded prior to and after use; available in six sizes; built-in needle depth control; proprietary spring action provides quick, gentle puncture	2	crash cart	(Trailer 1)	
Special Needs	Ostomy, Stomahesive, Flexable wafer	4"x4" flexable wafer	10	bin 26	(Trailer 1)	
Special Needs	Paste, Stomahesive	Stoma Ostomy Stomahesive Paste 2 oz Tube	10	bin 26	(Trailer 1)	
Special Needs	Diapers Adult XL	XL Adult Briefs	2	(10) bin 34	(10) bin 52	
Special Needs	Instant glucose	unit dose tube, 15 gm	10	crash cart	(Trailer 1)	
Special Needs	Glucometer	fast, easy calibration; 10 seconds for results	3	crash cart	(Trailer 1)	
Special Needs	Glucometer test strips	Ergonomical design; capillary action quickly wicks the sample into the test chamber; small sample size of only 3ul	3	crash cart	(Trailer 1)	
Special Needs	EM5555 CPAP (Oxypeep)		5	crash cart	(Trailer 1)	Biomed Review and Maintenance Recommended

Special Needs	Feeding tubes, pediatric - 5 French	1.7 mm x length: 36" (91cm)	1	crash cart	(Trailer 1)	
Special Needs	Feeding tubes, pediatric - 8 French	2.7 mm, length: 16" (41cm)	1	crash cart	(Trailer 1)	
Special Needs	Wheelchair (Bariatric)	Chrome Steel Framed Wheelchair w/Fixed Full Arm, Fixed Footrests. 22"	1	left front	(Trailer 1)	
Special Needs	Cane	Regular adjustable cane	10	right end of bin rack	(Trailer 1)	
Special Needs	Crutches - two sizes	Adult/Youth Steel Wingednut Crutches	6	left end of bin rack	(Trailer 1)	
Special Needs	Walker	1" adult, 1 button walker	5	right rear	(Trailer 1)	

Appendix E: Trailer Packing Schematics

