

As a Medical Screening team member you:

Report any questions or problems to the Medical Screening Lead:

Name: _____

NEVER leave your post to approach this person

ALWAYS send your request in writing via a runner (you have provided with ICS Form 213 for this purpose)

Forms to familiarize yourself with:

ICS 213-This is a form you can give to a runner to get a message to any of the people who report to you

ICS 214-This is a place to record anything you do so that the next Medical Screening Team Member can keep informed of steps that have already been taken

Drug Protocols Quick Sheet-Gives you simple choices that help you decide which station patient should move on to

Medical History & Consent Form- This is a form which you give to the patient to fill out

Yolo County
Health Department

137 North Cottonwood Street
Woodland, CA 95695

Phone: 530-666-8645
Fax: 530-666-3984



Yolo County
Health
Department

**Medical
Screening
Team**

**Quick
Reference
Guide**

Investing in our
Community's Future

