

As the Medical Screening Lead you:

Report any questions or problems to the Operations Section Chief (This is the person wearing the Red Vest).



If it is a question or problem of a Security nature please re-

port it to the Security/Safety Section Chief (This is the person in the Yellow Vest).



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 Lead can keep informed of steps that have already been taken

Shift Schedule-This is a Worksheet which has been provided to you for the ease of planning breaks, lunches, arrival, and departure times

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
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Yolo County
Health
Department

Medical Screening Lead

Quick Reference Guide

Investing in our
Community's Future

Responsibilities

- Making sure your station is equipped with all necessary equipment to carry out their function.
- Reporting Any and ALL problems to the Operations Section Chief (the person in the Red Vest).
- Routinely make contact with staff to ensure that all resources needed are provided.
- Observe all contacts for signs of stress and inappropriate behavior.
- Arrange for Restroom and Food Breaks for your staff
- Make sure all staff sign in upon arrival and sign out upon departure.
- Ensure Medical Screeners are familiar with the patient form(s) and be able to separate patients with no special needs from those patients that need additional help.

What is Medical Screening?

Medical Screening is the second point of contact with the general public. This is where information begins to be collected on the patient.

Introduce yourself to the patient.

- Asking if they have any initial questions about the clinic or vaccination
- Double checking medical history form is completely filled out.
- Having patient sign consent form for vaccination/medication

If patient's information is consistent with drug protocols provided send them on to next station with drug identification.

If not get a runner to take them to Pharmacist/Medical Consult for further evaluation.

DO NOT GIVE MEDICAL ADVICE OR SPEAK TO ANY MEDIA PERSONNEL ON BEHALF OF THE POD.

Identify people who seem to be confused or need extra assistance. These people may include:

- ⇒ **Elderly Patients**- please ask a runner to escort any volunteers in a wheelchair to the designated entrance. If further assistance is needed please ask Lead at your station for help.
- ⇒ **Patients with Special Needs**- please ask each volunteer with special needs if they will need assistance through the POD. If further assistance is needed please ask Lead at your station for help.
- ⇒ **Non- English Speakers**- for people who are Spanish speaking please be aware that there will be one person at each station that can translate. Please be aware of who this is so that you can direct all Spanish speaking volunteers to them.

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