



Spring 2026 Disaster Training

Berkeley Medical Reserve Corps

Agenda

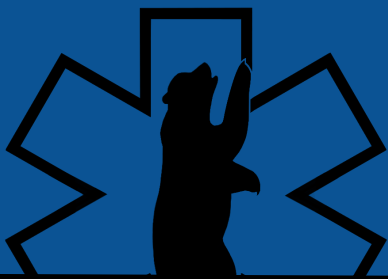
- What is an MCI?
- Tagging
- Progression of MCI
- Transporting
- Casualty Collection Point
- ICS & Radio Use
- Triage/Treatment Bags
- Demos
- Logistics
- Practice

What is an MCI?

A **mass casualty incident (MCI)** is “an event that overwhelms the local healthcare system, where the number of casualties vastly exceeds the local resources and capabilities in a short period of time.”

Triage is a system of sorting patients by level of priority to ensure that resources are being allocated to those that need them most.





Tagging

Priority Levels

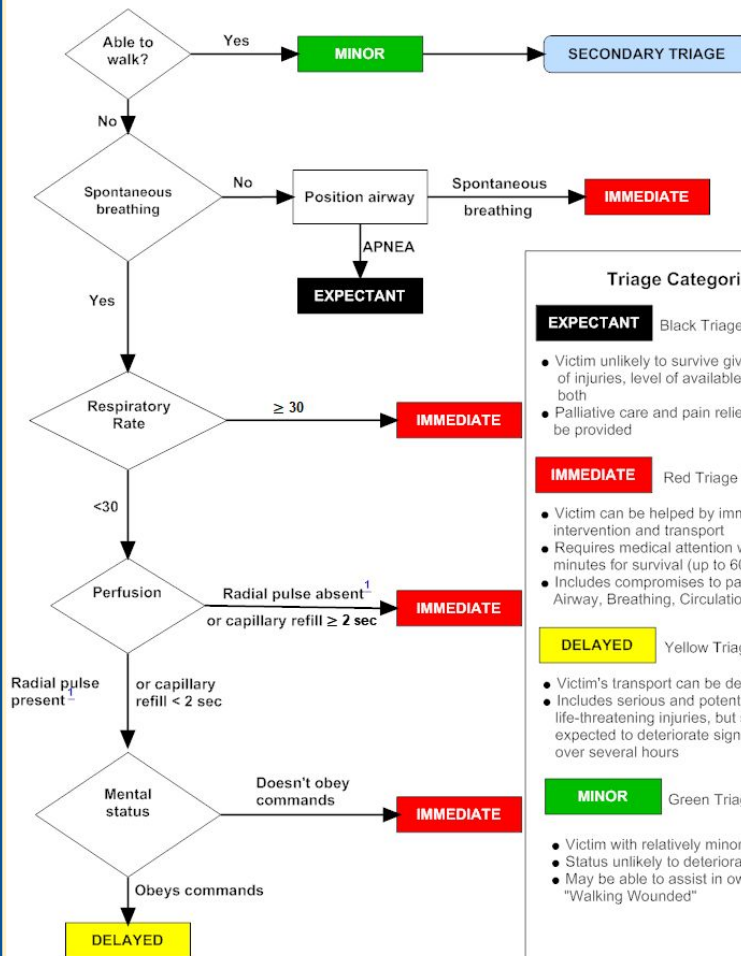
RED/Immediate: Highest priority, critically ill but potentially salvageable

YELLOW/Delayed: Patients with injuries that are unlikely to cause immediate loss of life

GREEN/Minor: Ambulatory patients with minor complaints

BLACK/Deceased: Lowest Priority, patients with no reasonable chance of survival

START Adult Triage



Triage Categories

EXPECTANT

Black Triage Tag Color

- Victim unlikely to survive given severity of injuries, level of available care, or both
- Palliative care and pain relief should be provided

IMMEDIATE

Red Triage Tag Color

- Victim can be helped by immediate intervention and transport
- Requires medical attention within minutes for survival (up to 60)
- Includes compromises to patient's Airway, Breathing, Circulation

DELAYED

Yellow Triage Tag Color

- Victim's transport can be delayed
- Includes serious and potentially life-threatening injuries, but status not expected to deteriorate significantly over several hours

MINOR

Green Triage Tag Color

- Victim with relatively minor injuries
- Status unlikely to deteriorate over days
- May be able to assist in own care: "Walking Wounded"

START Triage (for adults)

Can they walk? If yes, **green tag**

Are they breathing after repositioning airway? If no, **black tag**

Respirations: 30 or less?

Perfusion: Radial pulse with cap refill <2 sec?

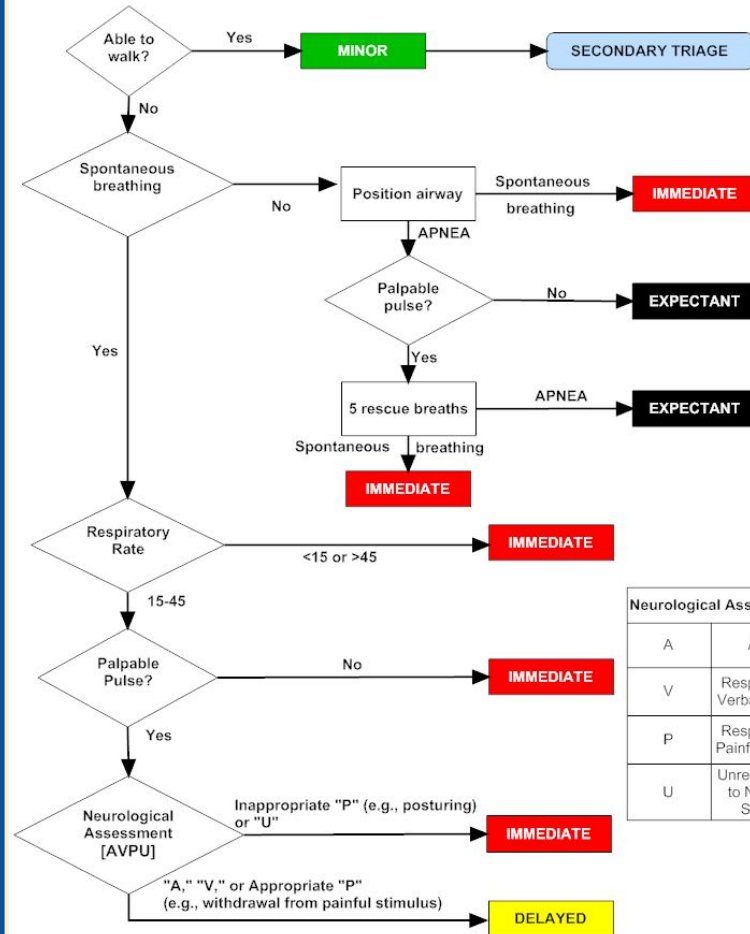
Mental Status: Can they follow basic commands?

If yes to all, **yellow tag**

Otherwise, **red tag**

30 2 Can Do

JumpSTART Pediatric Multiple Casualty Incident Triage



Neurological Assessment	
A	Alert
V	Responds to Verbal Stimuli
P	Responds to Painful Stimuli
U	Unresponsive to Noxious Stimuli

Use JumpSTART if the Patient appears to be a child.
 Use an adult system, such as START, if the patient appears to be a young adult.

jumpSTART Triage

*For children (approx. 1-8yrs)

Differences

Deliver 5 rescue breaths if apneic with pulse after repositioning airway

Respirations: Between 15 and 45?

Perfusion: Palpable pulse?

Neurological: A or V from AVPU?



Tagging Summary

If pt. can walk: **GREEN**

If pt. can't walk but pass RPM tests: **YELLOW**

If pt. can't walk and fail any RPM test: **RED**

If pt. remain apneic after repositioning airway: **BLACK**

Practice!

Patient is a child found crying and holding their ankle. Ankle appears broken.

R: 35 BPM.

P: Brachial pulses present.

M: Holds your hand on command.

Practice!

Patient is a child found crying and holding their ankle. Ankle appears broken.

R: 35 BPM.

P: Brachial pulses present.

M: Holds your hand on command.

Yellow Tag

Practice

Patient found supine and unconscious. Spurting gash on right thigh.

R: Patient is apneic. After a jaw-thrust, the patient begins to breath at 6 breaths/ minute.

P: Capillary refill is 4 seconds.

M: Patient is unconscious.

Practice

Patient found supine and unconscious. Spurting gash on right thigh.

R: Patient is apneic. After a jaw-thrust, the patient begins to breath at 6 breaths/ minute.

P: Capillary refill is 4 seconds.

M: Patient is unconscious.

Red Tag

What interventions tho?

Practice

Patient found supine and unconscious. Spurting gash on right thigh.

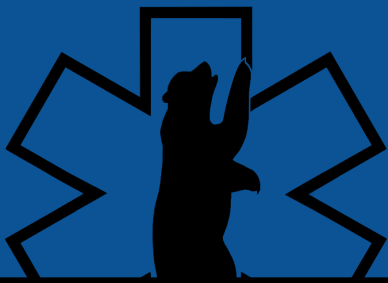
R: Patient is apneic. After a jaw-thrust, the patient begins to breath at 6 breaths/ minute.

P: Capillary refill is 4 seconds.

M: Patient is unconscious.

Red Tag

+ OPA + tourniquet



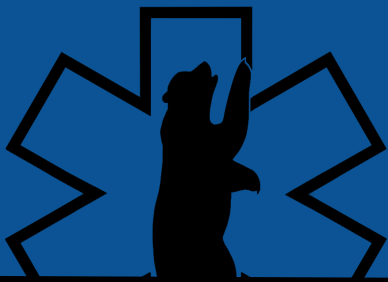
Progression of MCI

Progression Overview

1. Scene Safety
 - a. ROTC, Falck, UCPD will secure this
2. Treatment teams establish treatment zone while transport teams begin triage
3. Call for ambulatory (**Green Tag**) patients to gather
4. Triage non-ambulatory patients (**Red**, **Yellow**, and **Black** Tags)
5. Transport patients to CCP and treat

Staggered Entry (NEW)

1. First round of entry
 - ROTC, Falck, UCPD will secure the scene
2. Second round of entry
 - IC, triage leader, treatment leader
 - We take over command from Falck and establish ICS
3. Third + cont. Entry
 - IC starts dispatching teams
 - **Listen CAREFULLY to which team is being sent out!**
 - Each triage team will be assigned to a zone
 - Treatment team will establish CCP



Transport

Sit-Pick

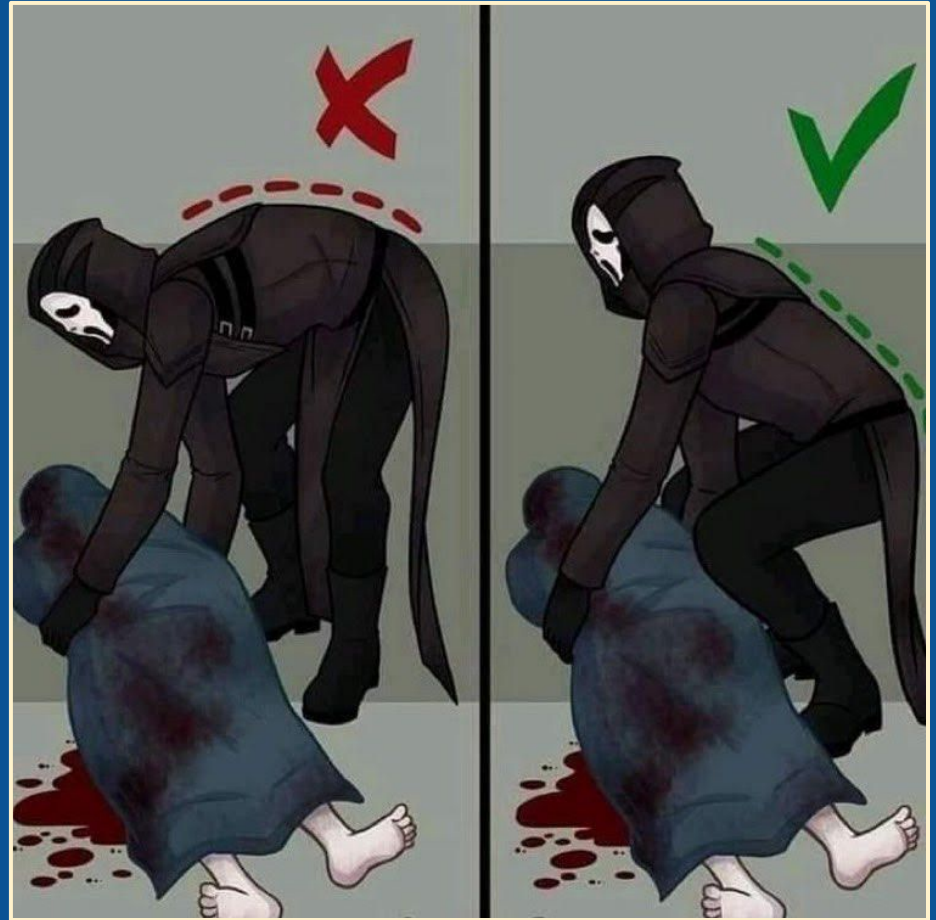
For short distances only

→ Onto evacuaid

→ To safer location



**Please lift with your
legs and not your
back!**



Evacuaid

With 2 people: one person and the head and one at the feet

With 4 people: two people on each side

→ Underhand Grip

→ Can move people using either sit-pick or roll and shift

Mostly: go feet first; uphill: go head-first



Field Interventions

Only treat life-threatening injuries during triage!

→ If you think this patient will die the next time you come back, treat!

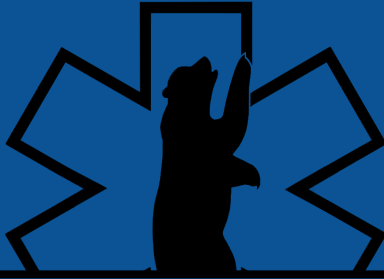
Supplies in triage packs:

- OPAs
- Tourniquets
- Occlusive Dressing
- Gauze
- Chest seals



What NOT To Do?





Casualty Collection Point

Organization of CCP

CCP: Casualty Collection Point

After pts. have been transported to the CCP, they will get tag cards and be sorted into their zones:

Green Zone

Yellow Zone

Red Zone

Transporting to the CCP

CCP = Casualty Collection Point

Green Tag Patients

- Ambulatory patients will be guided to CCP

Yellow Tag Patients

- C-collar if called for
- Splint before transport if resources allow

Red Tag Patients

- Priority transport!
- Do not take full spinal precautions
- Stop major bleeds

Treatment in the CCP

Assessment:

- Vitals
- Trauma Assessment (DCAP-BTLS)
- AxO

Reassess often and document on triage tags!

Possible Interventions:

- Shock Control
- Bleeding Control
- Splinting/wrapping
- Airway management
- Potential medical treatments as well

Yes	No	Primary Decon
Yes	No	Secondary Decon
Solution		
Blunt Trauma		
Burn		
C-Spine		
Cardiac		
Crushing		
Fracture		
Laceration		
Penetrating Injury		

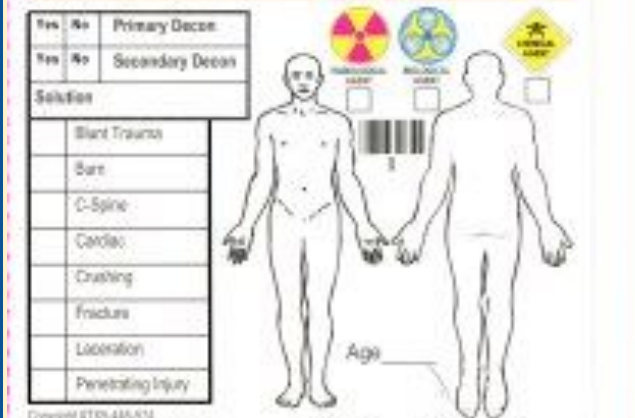
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Dixie Management Systems, Inc.

Age: _____
 Male Female

Other: _____

VITAL SIGNS			
Time	B/P	Pulse	Respiration

Time	Drug Solution	Dose



The form includes two anatomical diagrams of a human figure, one facing forward and one facing backward. Above the diagrams are three hazard symbols: a yellow radiation symbol, a blue biohazard symbol, and a yellow biohazard symbol with a star. Below the diagrams are checkboxes for 'Male' and 'Female'. The form also features a barcode and a field for 'Age'.

CONTAMINATED

Personal Property Receipt/
Evidence Tag *2538699*

Destination *2538699*

Via *2538699*

TRIAGE TAG

S L U D G E M
Solvents Lachrimators Irritants Defensives G.I. Debris Explosives Metals

AUTO INJECTOR TYPE 1 2 3
AUTO INJECTOR TYPE 1 2 3

Yes/No Primary Decon
Yes/No Secondary Decon

Solution

Blunt Trauma
Burn
C-Spine
Cardiac
Choking
Fracture
Laceration
Penetrating Injury

Aggl

Male Female

Other: _____

VITAL SIGNS

Time	BP	Pulse	Respiration

Time	Drug Solution	Dose

MORGUE
2538699

IMMEDIATE
2538699

DELAYED
2538699

MINOR
2538699

EVIDENCE *2538699*

EVIDENCE

Personal Property Receipt/
Evidence Tag *2538699*

Destination *2538699*

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TRIAGE TAG

S L U D G E M
Solvents Lachrimators Irritants Defensives G.I. Debris Explosives Metals

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Yes/No Primary Decon
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Solution

Blunt Trauma
Burn
C-Spine
Cardiac
Choking
Fracture
Laceration
Penetrating Injury

Aggl

Male Female

Other: _____

VITAL SIGNS

Time	BP	Pulse	Respiration

Time	Drug Solution	Dose

MORGUE
2538699

IMMEDIATE
2538699

DELAYED
2538699

MINOR
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Personal Property Receipt/
Evidence Tag *2538699*

Destination *2538699*

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TRIAGE TAG

S L U D G E M
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Yes/No Primary Decon
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Solution

Blunt Trauma
Burn
C-Spine
Cardiac
Choking
Fracture
Laceration
Penetrating Injury

Aggl

Male Female

Other: _____

VITAL SIGNS

Time	BP	Pulse	Respiration

Time	Drug Solution	Dose

MORGUE
2538699

IMMEDIATE
2538699

DELAYED
2538699

MINOR
2538699

CONTAMINATED

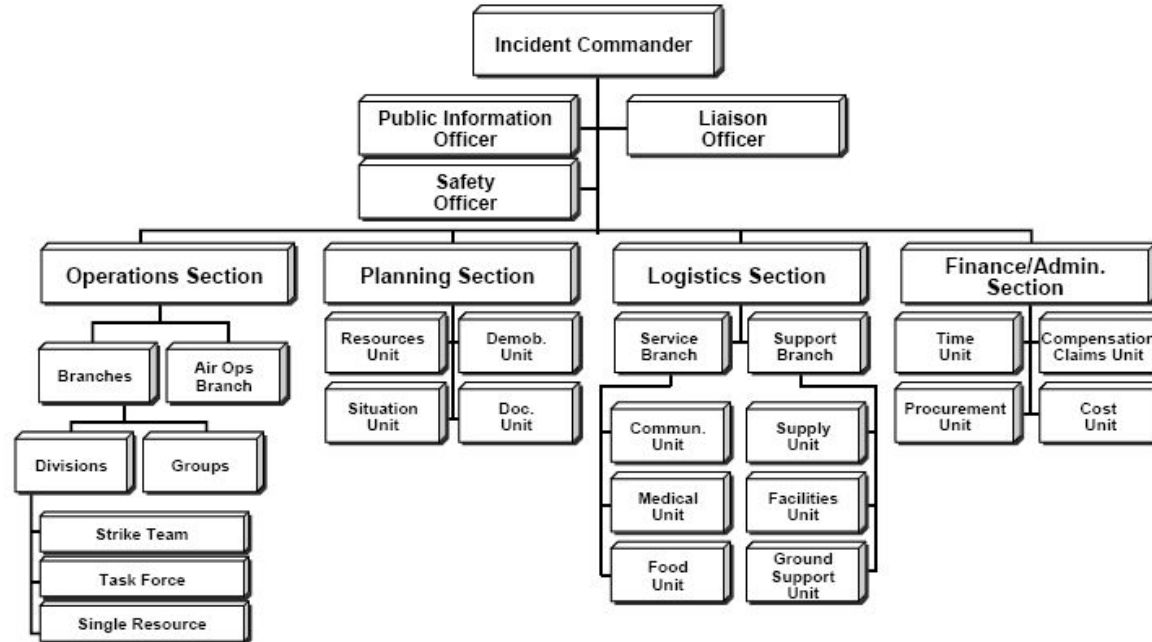
EVIDENCE *2538699*

EVIDENCE



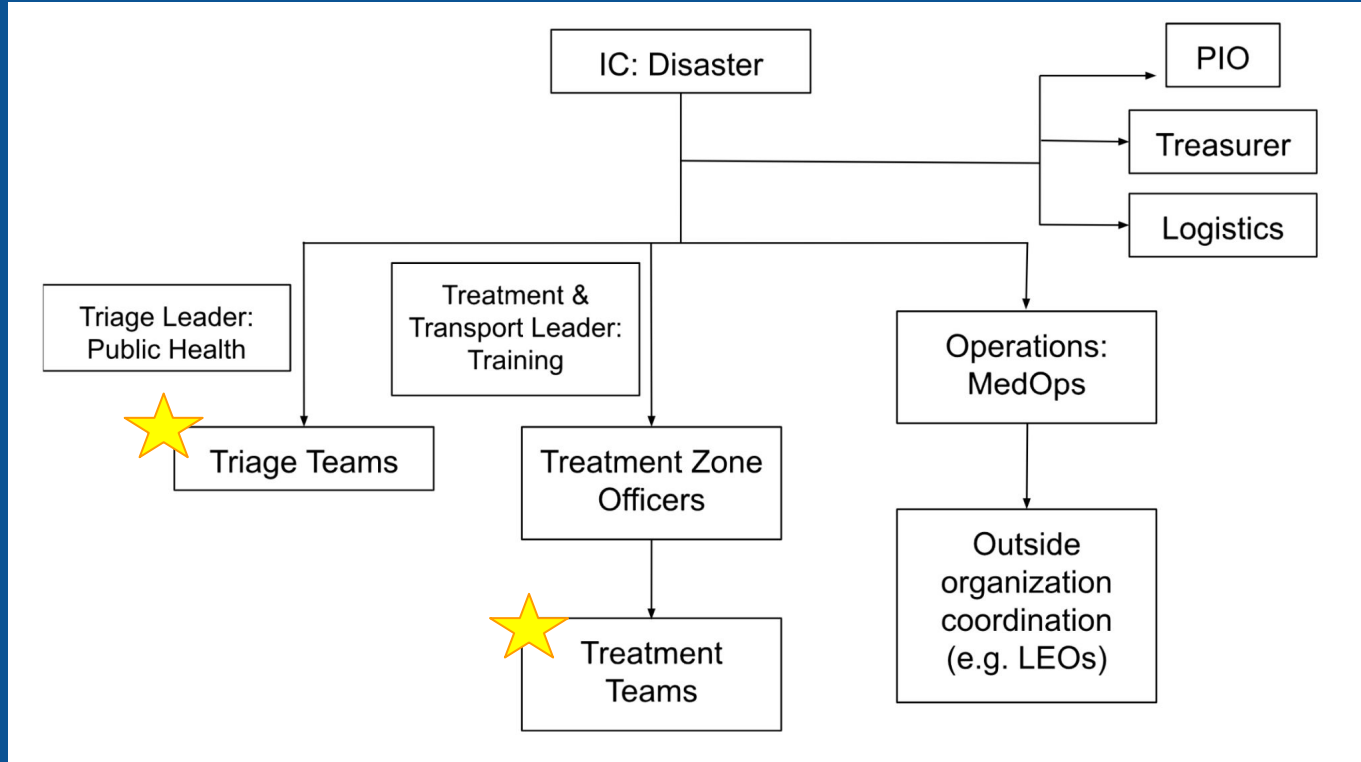
ICS & Radio

ICS Structure



ICS Structure

Our Structure



★ Gen
members
& FTOs

ICS Positions

Incident Commander (Disaster Directors)

→ All triage teams report to IC via radio

Triage Leader (Public Health Directors)

→ Manage triage teams/keep track of pt. numbers in the field

→ Triage teams report straight to IC!! Triage lead is like a supervisor who's not directly involved in radio commands.

ICS Positions cont.

Treatment & Transport Leader (Training Directors)

- Establish CCP zones with Treatment Zone Officers
- Manage zone officers/keep track of pt. numbers and transport priority in CCP
- Just like the triage lead, treatment lead is a supervisor for the CCP who's not directly involved in radio commands

Treatment Zone Officer (FTOs)

- FOR TRIAGE TEAMS BRINGING PATIENTS IN:
 - ◆ Let them know what chief complaint is
 - ◆ They'll let you know where to place the patient
- Same as treatment officer but for specific zones (Green, Yellow, and Red)

Team Structures

Team Composition:

- Lead: FTO
- 4-5 general members

All members in teams will participate in treatment and triage

During the Drill:

- 7 Triage Teams
- 4 Treatment Teams

Teams will rotate, but due to the number of teams, some will only be triage



Communication is key!

Radio Use



→ Arrival on scene

◆ “Dispatch this is Triage 1, we have arrived in zone 1.”

→ Number and type of patients

◆ “Dispatch this is Triage 1, we have 3 red, 2 yellow, and 4 green tagged patients in sector 1.”

→ When there are no more patients in a sector

◆ “Dispatch this is Transport 1, all patients have been transported from sector 1 to the CCP”

Count Your Patients!!

→ Triage Tape

- ◆ Keep a piece of it after each patient

→ Triage Team FTO

- ◆ Get a total count of patients from your team
- ◆ Remember that multiple teams could be deployed to one zone
 - Just count the # of patients in YOUR TEAM

→ WE WILL BE ON YOUR ASS FOR THIS



Hand-Offs

→ Field → Treatment Zone

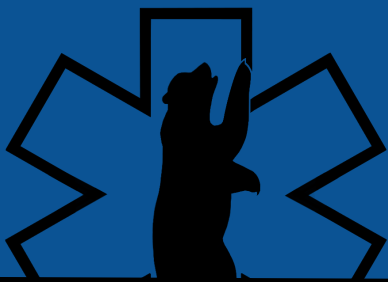
- ◆ Give a quick report to zone leader
 - RR
 - Cap Refill
 - Follows command?
 - Injury
 - Interventions

◆ Don't just leave the patient and run off!!

→ Treatment Zone → Falck

- ◆ Zone leaders MUST know which patient going next (depending on injury and judgement)
- ◆ Give Hand-Off Report (follow list on top + any additional info from treatment zone)





What's In the Bag?

Triage Bag

→ Supplies:

- ◆ Flashlight
- ◆ Splint
- ◆ Gauze rolls
- ◆ Tourniquets
- ◆ Pocket mask
- ◆ OPA
- ◆ Triangle bandages
- ◆ Tape
- ◆ Pressure Dressing
- ◆ ACE Bandages
- ◆ Chest seals



DEMO 1: Stabilizing Object

DEMO 2: Pressure Dressing

DEMO 3: Triage Tape



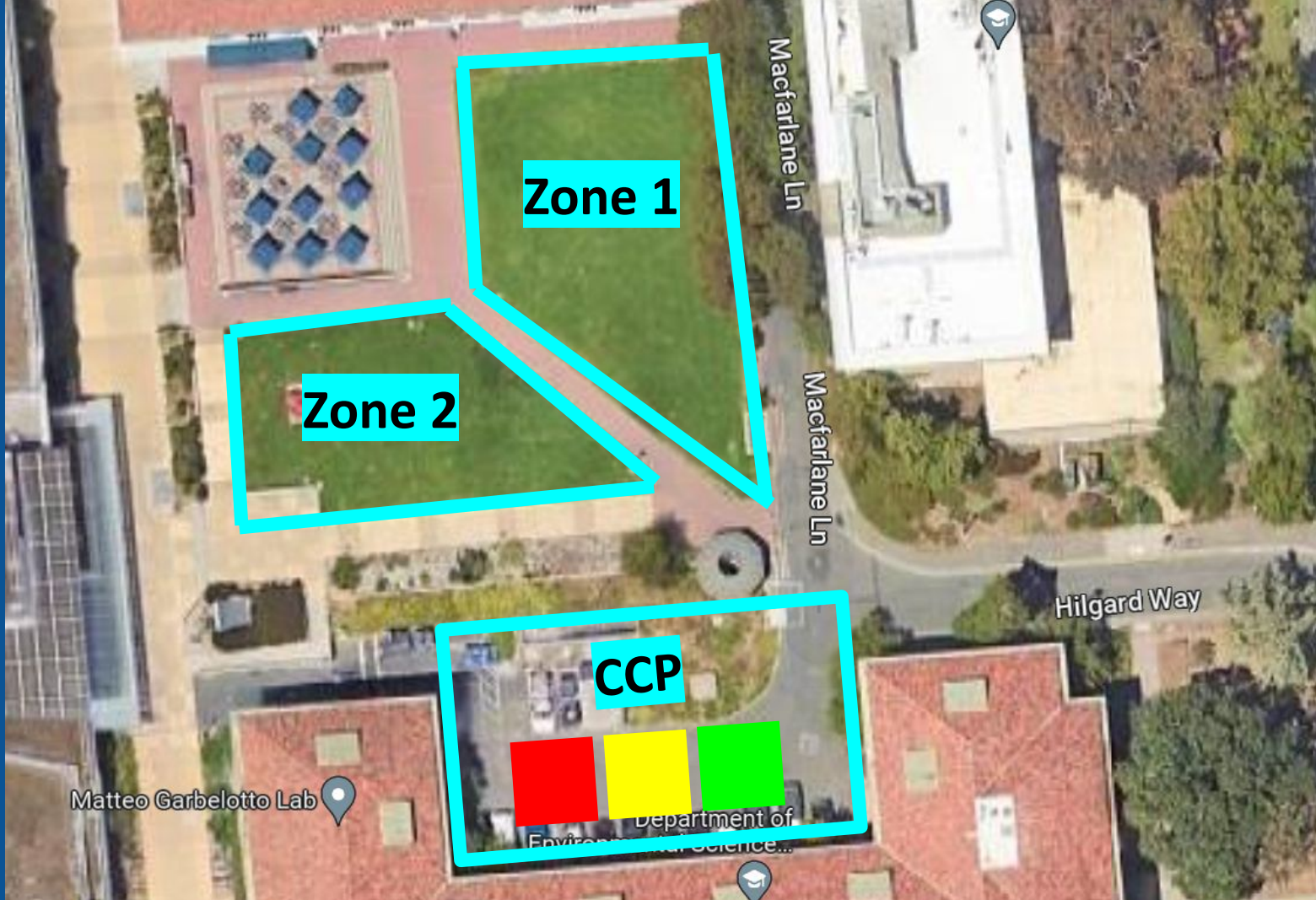
Macfarlane Ln

Macfarlane Ln

Hilgard Way

Matteo Garbelotto Lab

Department of Environmental Science...



Zone 1

Zone 2

CCP

Matteo Garbelotto Lab

Department of
Environmental Science...

Hilgard Way

Macfarlane Ln

Macfarlane Ln



BMRC



Patient



Macfarlane Ln

Macfarlane Ln

Matteo Garbelotto Lab

Department of Environmental Science...

H...



BMRC



Patient

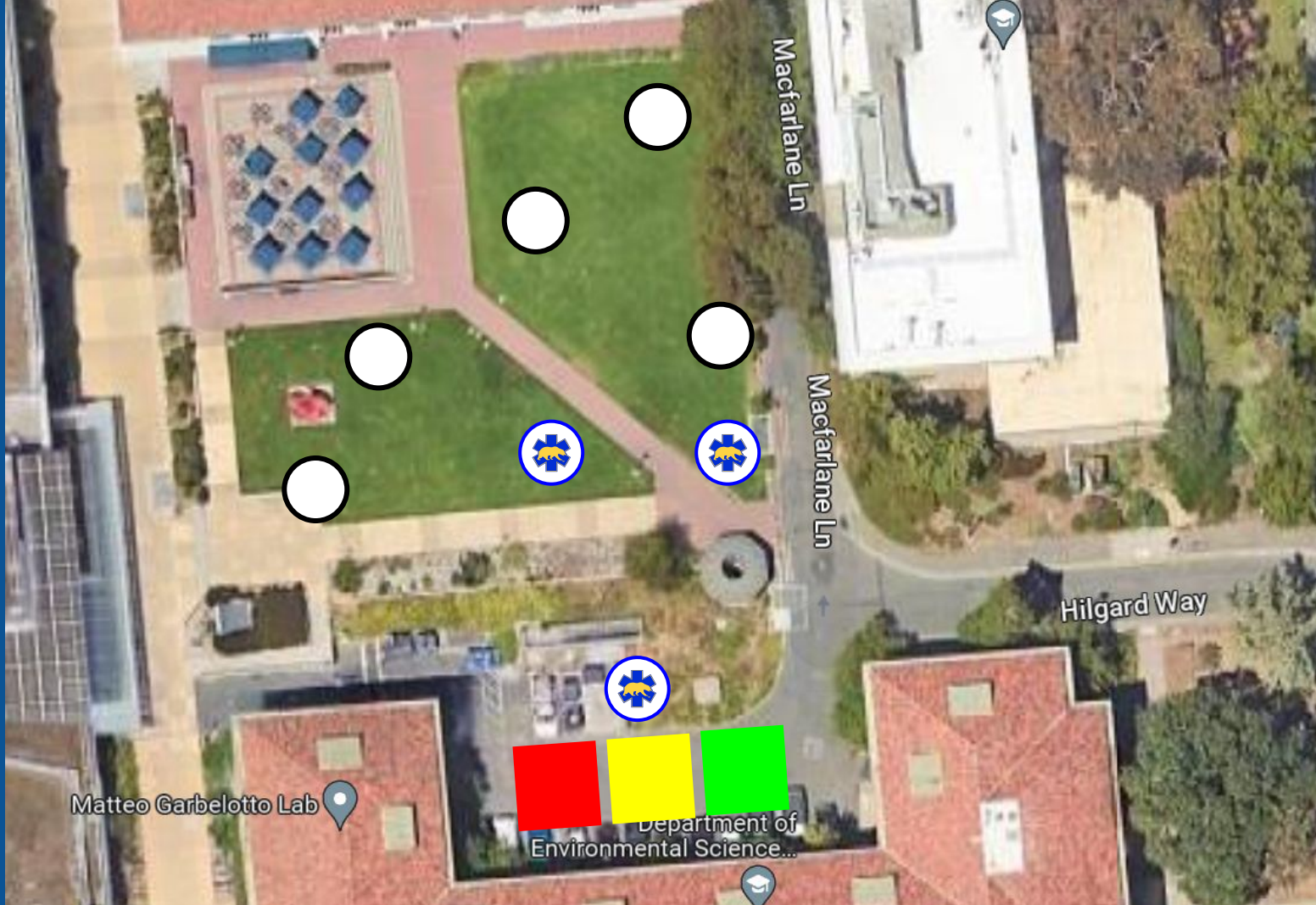




BMRC



Patient

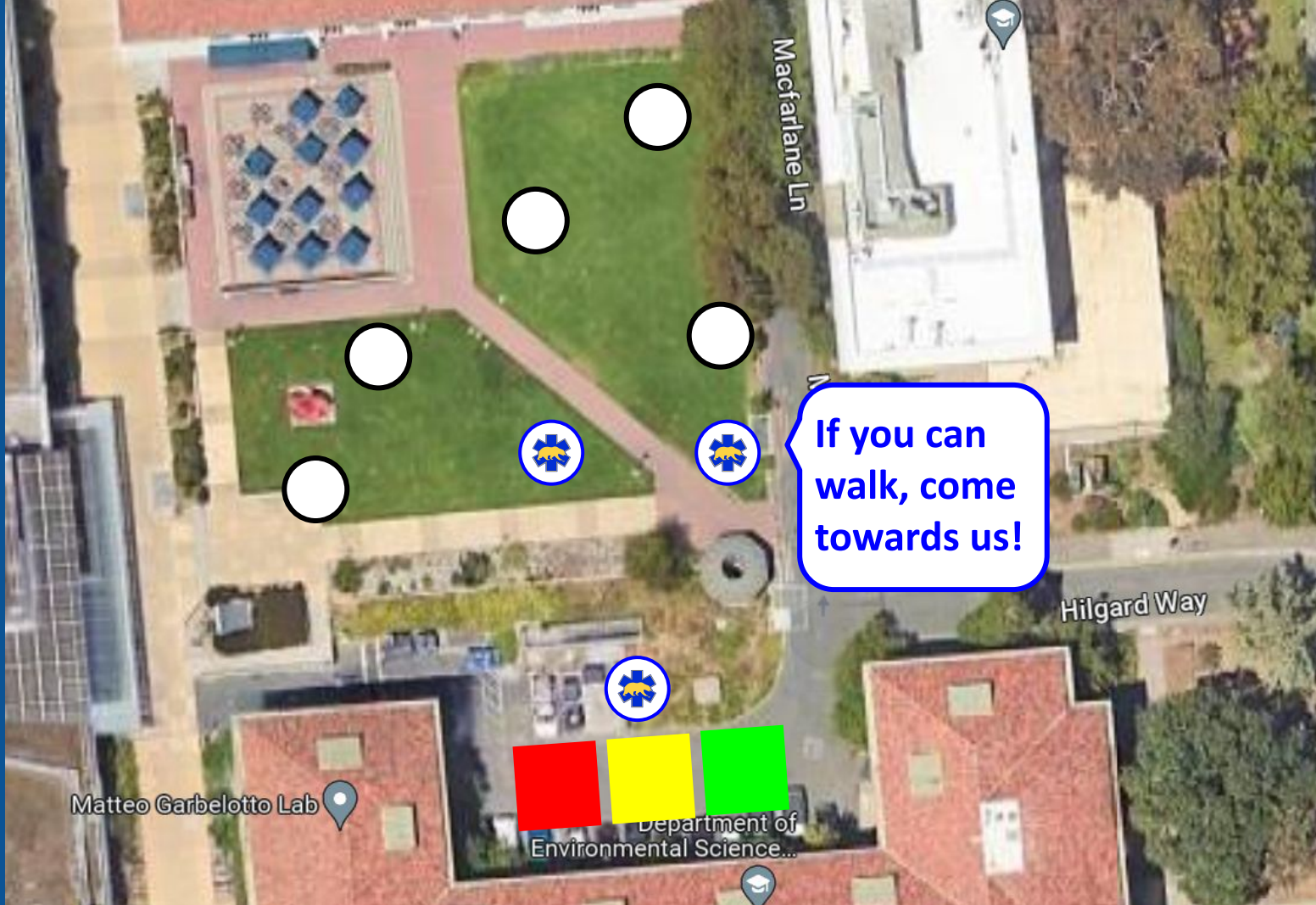




BMRC



Patient



Macfarlane Ln

Hilgard Way

Matteo Garbelotto Lab

Department of Environmental Science...

If you can walk, come towards us!





BMRC



Patient



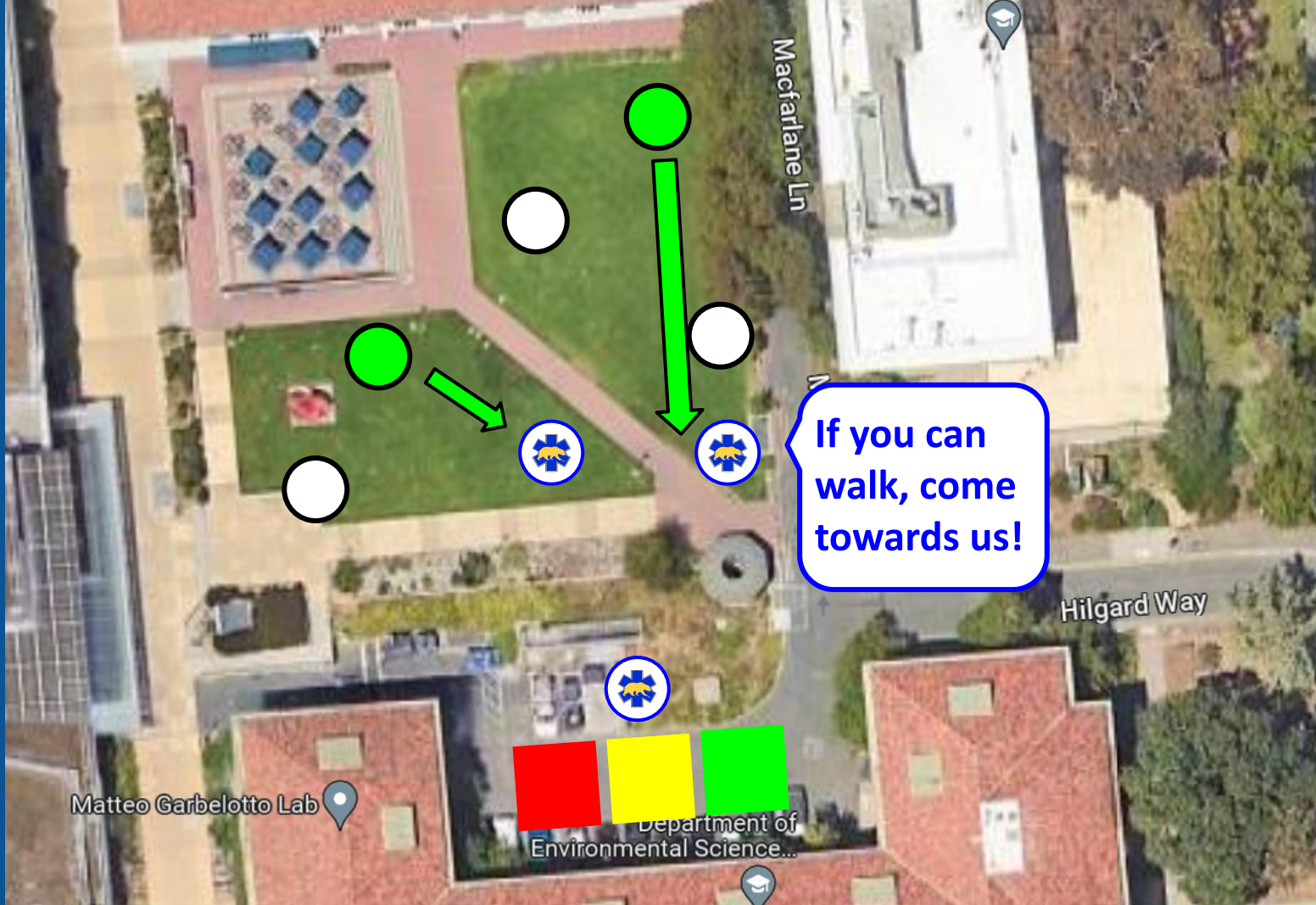
Green Tag



Yellow Tag



Red Tag





BMRC



Patient



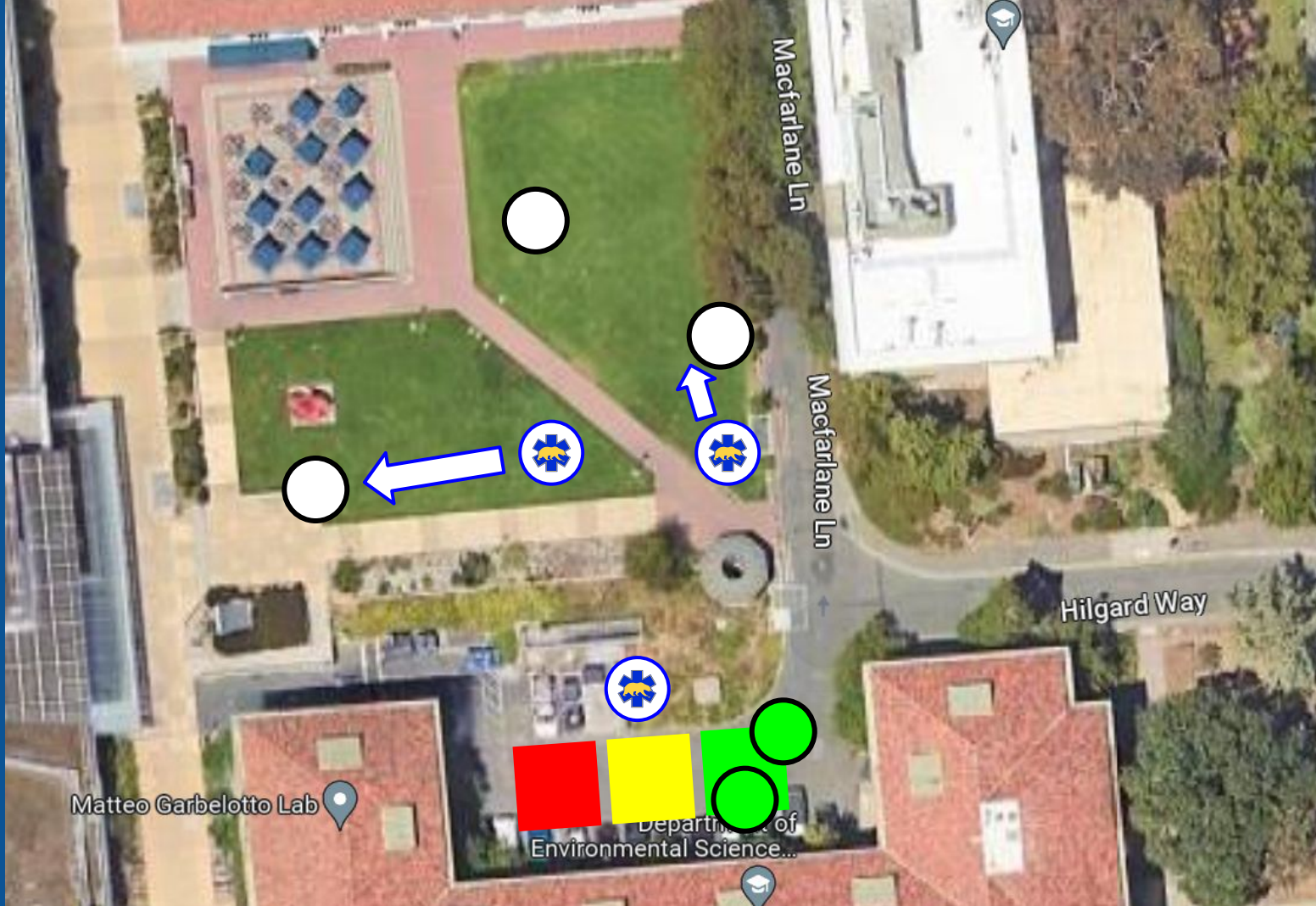
Green Tag



Yellow Tag



Red Tag





BMRC



Patient



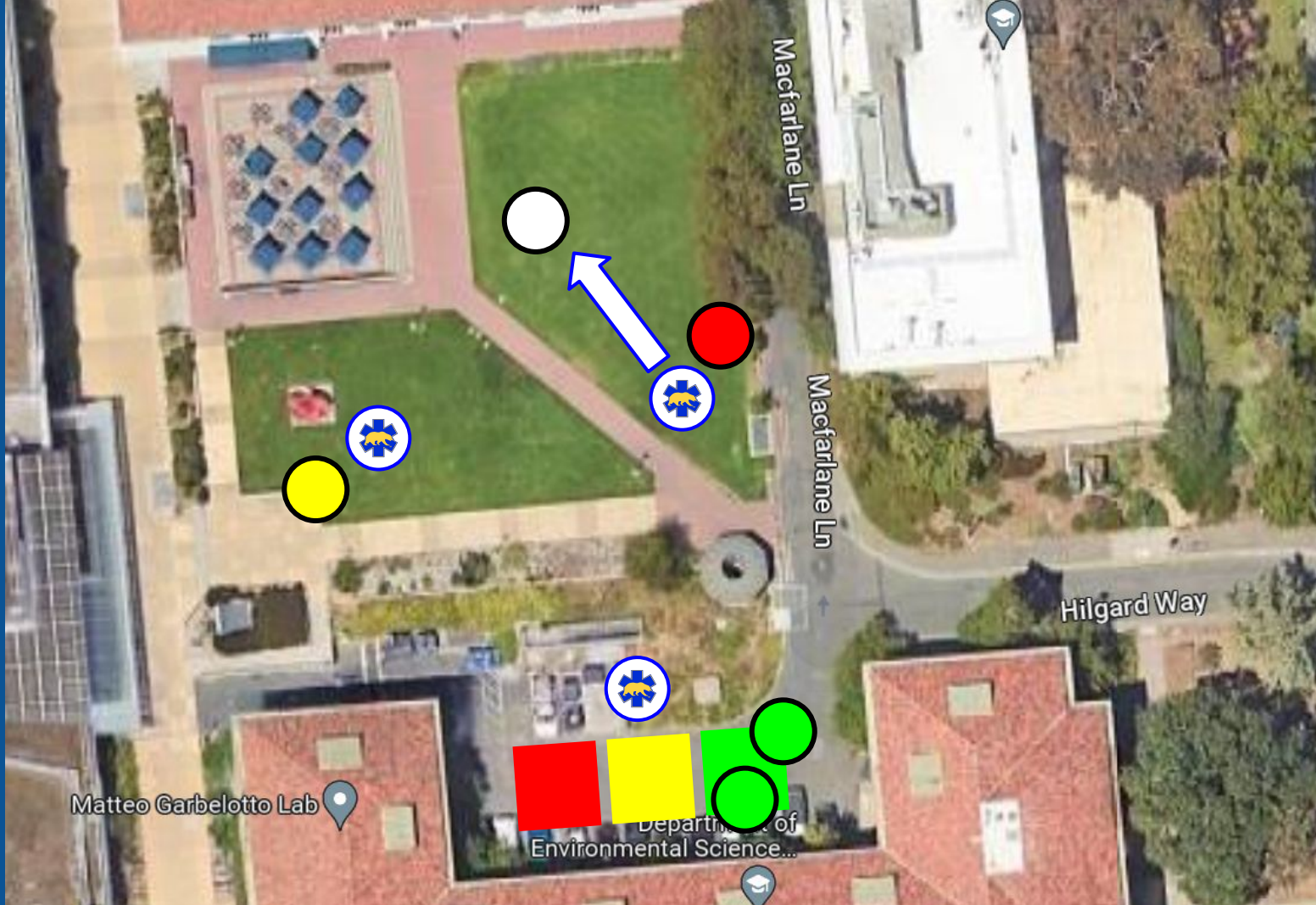
Green Tag



Yellow Tag



Red Tag





BMRC



Patient



Green Tag

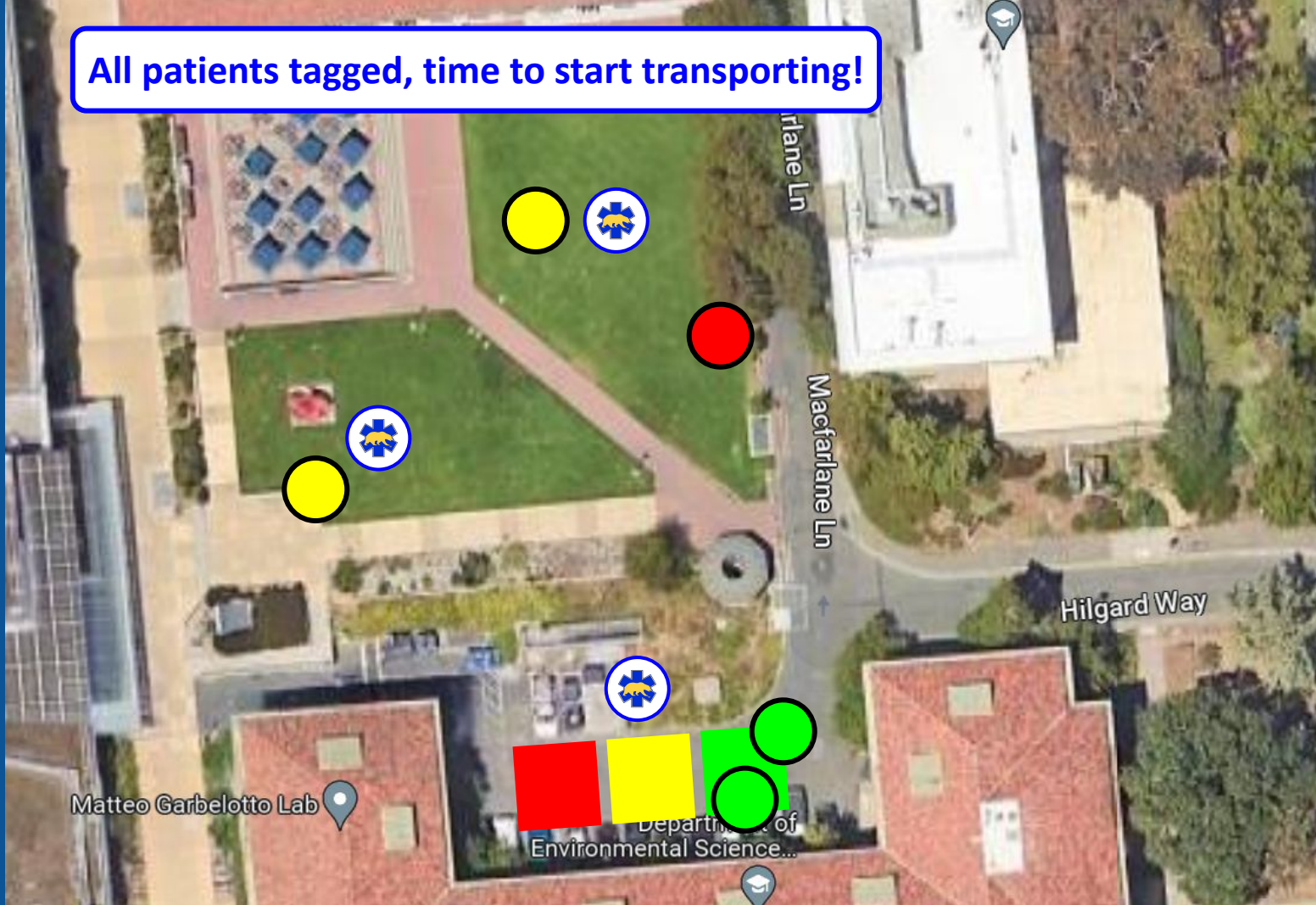


Yellow Tag



Red Tag

All patients tagged, time to start transporting!





BMRC



Patient



Green Tag

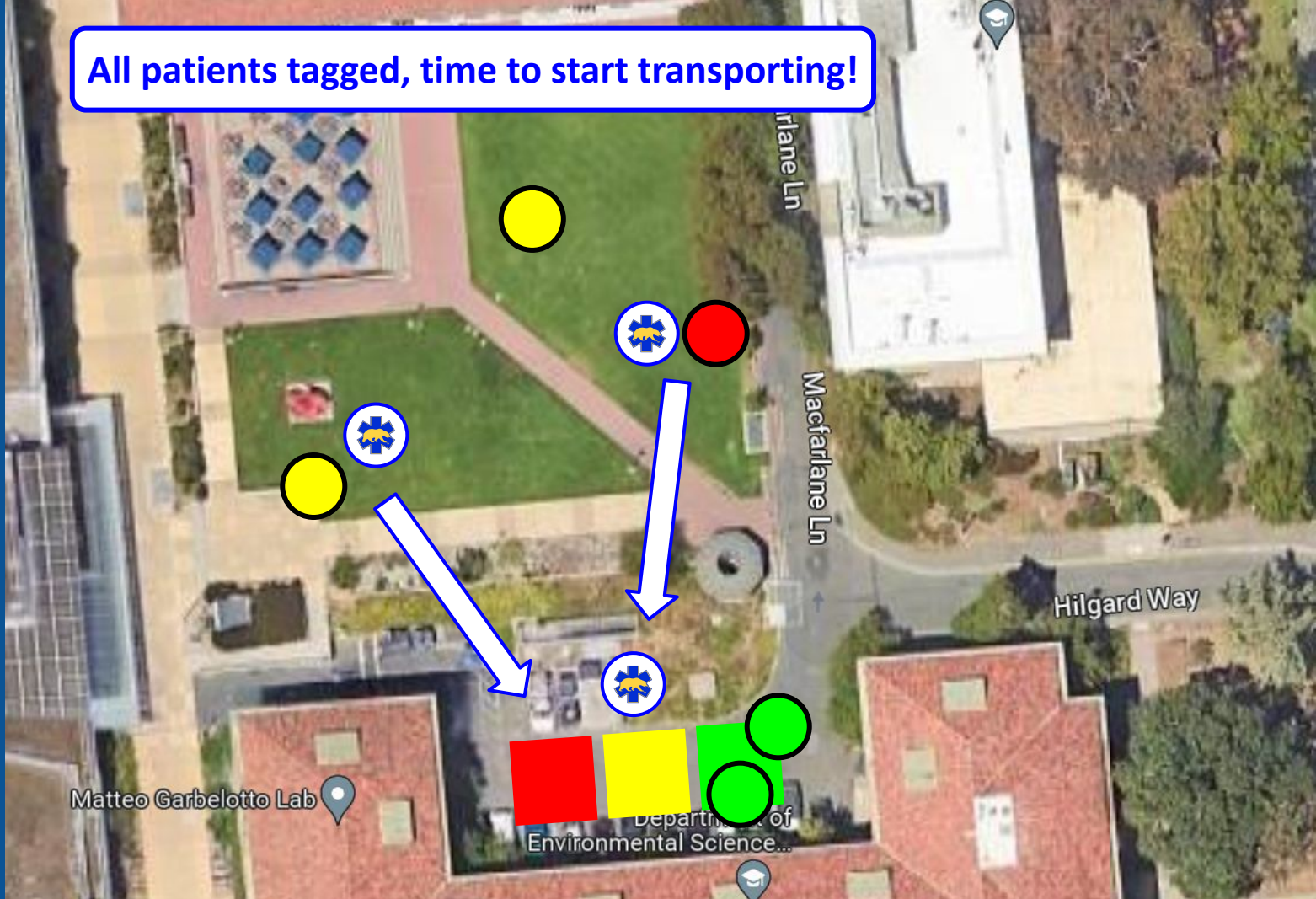


Yellow Tag



Red Tag

All patients tagged, time to start transporting!





BMRC



Patient



Green Tag

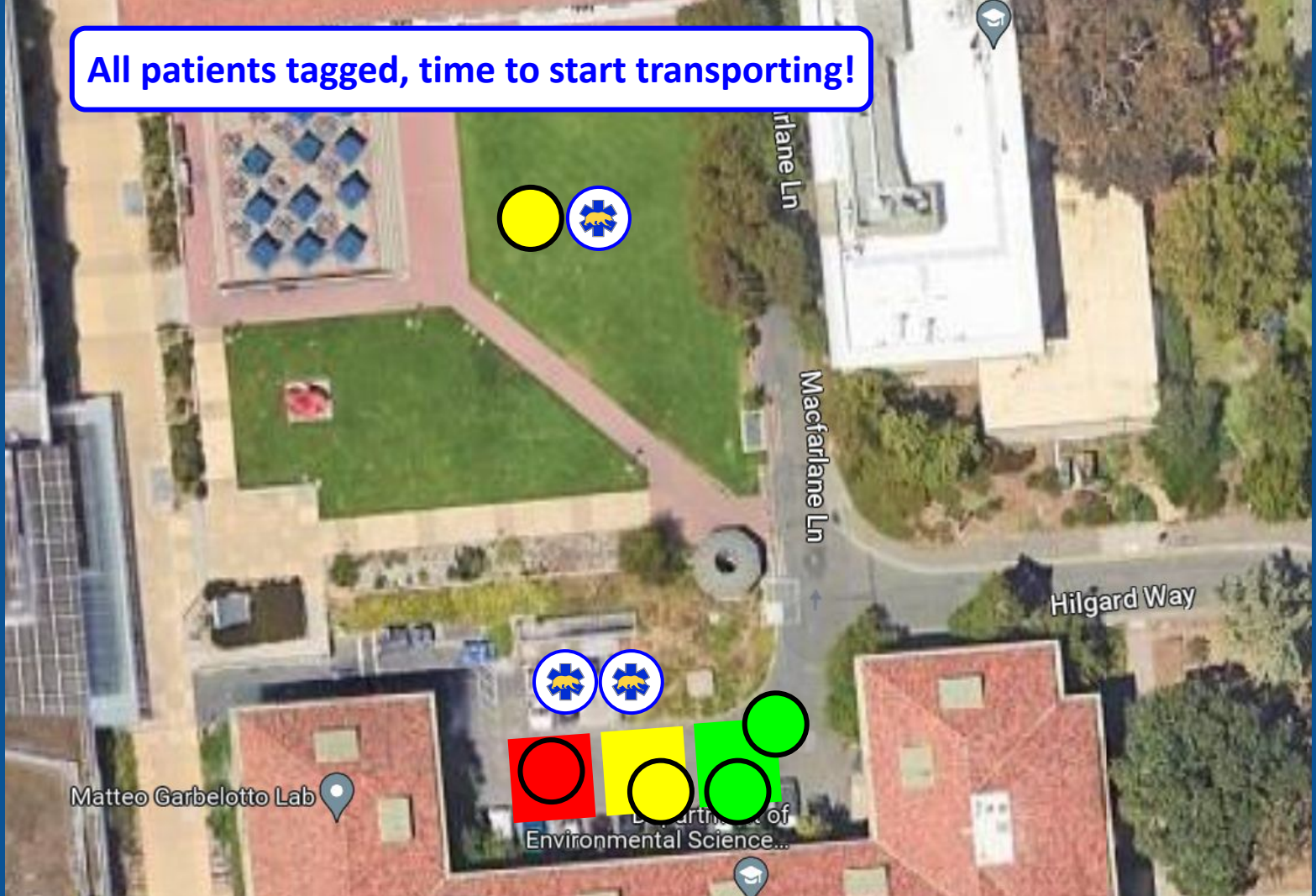


Yellow Tag



Red Tag

All patients tagged, time to start transporting!





BMRC



Patient



Green Tag

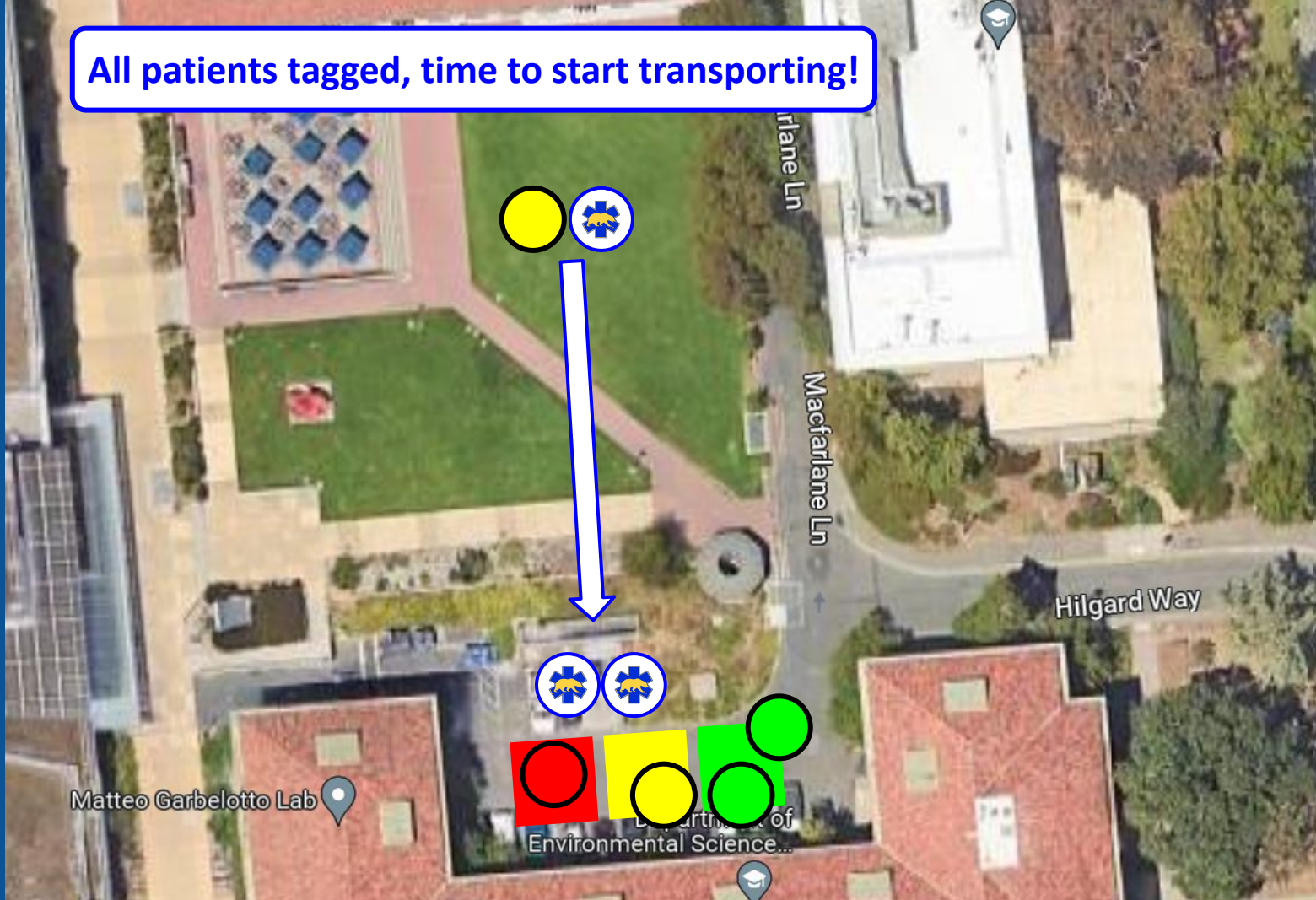


Yellow Tag



Red Tag

All patients tagged, time to start transporting!





BMRC



Patient



Green Tag

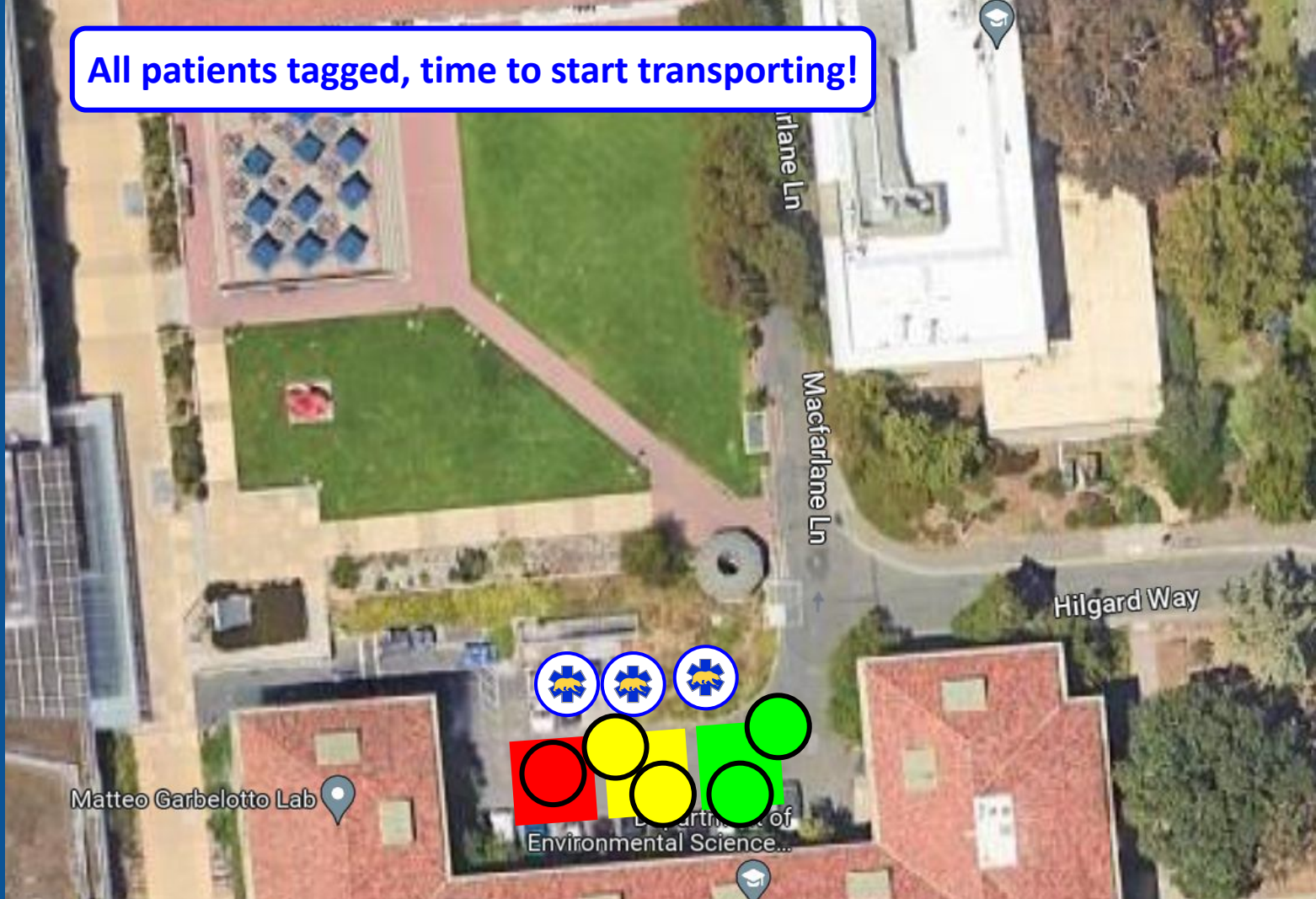


Yellow Tag



Red Tag

All patients tagged, time to start transporting!





BMRC



Patient



Green Tag



Yellow Tag



Red Tag



All patients in the CCP: treat and reassess!

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BMRC



Patient



Green Tag



Yellow Tag



Red Tag



We can
take two
people!

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Department of
Environmental Science...



BMRC



Patient



Green Tag



Yellow Tag



Red Tag



Logistics

Location: Grimes Engineering Building

Meet: Hearst Mining Circle

Time: 0800-1300

Dress Code: Full Uniform

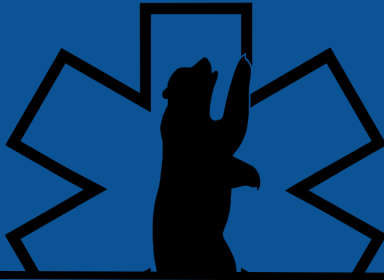
Pizza and Water After!!



EMT & FTO Protocols

FTO Protocol

EMT Protocol



Practice!
