

CHEMPACK DEPLOYMENT IC WORKSHEET

1. Contact local medical control for collaboration of CHEMPACK deployment.

A. Medical control _____

B. Doctor's name _____

C. Phone number _____

D. Type of emergency _____

E. Estimated number of victims _____

2. Contact State of Ohio Joint Dispatch Facility (OJDF) at 1-866-599-5377.

Note: OJDF needs to know all information in sections 2 and 3.

A. IC Name _____ Rank _____

Agency _____

Cell phone command post number #1 _____

Cell phone command post number #2 _____

B. County in which incident occurred _____

C. Jurisdictional law enforcement agency _____

3. Identify staging location:

A. Address _____

and/or

GPS: Latitude _____ Longitude _____

4. OSP will call back IC and identify the host hospital where CHEMPACK is coming from the Point of Contact (POC), phone number, and approximate ETA.

5. Upon OSP's arrival at staging they will make direct contact with the staging manager.

6. Complete CHEMPACK Control Substance Transfer Form.