

# HOSPITAL STATUS REPORT SHORT FORM

<b>FACILITY NAME:</b>		<b>DATE:</b>	<b>TIME:</b>	
<b>Contact Name:</b>		<b>Phone #</b>	<b>Fax #</b>	
<b>Other Phone, Fax, Cell Phone, Radio:</b>				
<b>HOSPITAL EOC STATUS</b>		<b>ATTACHMENTS PROVIDED</b>		
<input type="checkbox"/> ONE				
NOT ACTIVATED		HICS ORGANIZATION CHART		
LIMITED ACTIVATION		DEOC RESOURCE REQUEST FORMS		
FULL ACTIVATION		DEOC HOSPITAL STATUS REPORT FORM - STANDARD		
<b>CONTACT INFORMATION</b>		INCIDENT ACTION PLAN		
HEOC MAIN CONTACT NUMBER		PHONE/COMMUNICATIONS DIRECTORY		
HEOC MAIN CONTACT FAX		<b>GENERAL SUMMARY OF SITUATION/CONDITIONS</b>		
NAME LIAISON TO PUBLIC HEALTH/MEDICAL HEALTH BRANCH				
CONTACT NUMBER				
INFORMATION OFFICER NAME				
CONTACT NUMBER				
CONTACT EMAIL				
IF HEOC IS NOT ACTIVATED, WHO SHOULD BE CONTACTED FOR QUESTIONS/REQUESTS				
CONTACT NUMBER		<b>8 Hrs.</b>	<b>✓ if Staffed</b>	<b>24 Hrs.</b>
CONTACT EMAIL		CRITICAL CARE BEDS (ADULT)		
		MEDICAL BEDS		
		SURGICAL BEDS		
		OB/GYN BEDS		
		BURN BEDS		
		PEDIATRIC BEDS (INCLUDING NICU/PICU)		
		PSYCHIATRIC BEDS		
<b>PATIENT FLOW INFORMATION</b>		<b>TOTAL</b>		
AMBULATORY PATIENTS TO EVACUATE				
NON-AMBULATORY PATIENTS TO EVACUATE				
PATIENTS TREATED AND RELEASED				
PATIENTS ADMITTED (LAST 12 HOURS)				
PATIENTS NOT YET SEEN				
OTHER PATIENT CARE INFORMATION :		<b>DEOC/EOC/DUTY CHIEF USE</b>		

Send this form to the DEOC at **FAX # 408-794-0735**. If telephones/fax are not working, use alternate means of communication (radio, messenger, etc.) to reach the DEOC at **408-794-0700**. Use the PROBLEM REPORT/RESOURCE REQUEST FORM to request resources.