2.2 - Hospital Regional Disaster Committee (Type II)

Applicable Levels

LI, LII, LIII, PTCI, PTCI

PRQ Question Text [Field Type]

*1. Describe your center's participation in preparations for a regional disaster response (for example, committee participation or involvement with health care coalitions). *[Text box]*

*2. Describe your center's participation in regional mass casualty exercises over the course of the Reporting Period. *[Text box]*