2.3 - Disaster Management Planning (Type II) Applicable Levels

LI, LII, LIII, PTCI, PTCI

PRQ Question Text [Field Type]

*1. Upload attendance records or meeting minutes demonstrating trauma surgeon participation and orthopaedic surgeon participation (LI, PTCI) in disaster committee meetings over the course of the Reporting Period. *[Attachment]*

*2. Upload your hospital's disaster plan that includes a surgical response and the following elements of orthopaedic trauma care: definition of critical personnel requirements and means of contact, initial triage of orthopaedic patients, and coordination of secondary procedures. *[Attachment]*

*3. Upload the completed 'Drills and Activations' template. [Attachment]

*4. Highlight any challenges or gaps that have been identified in your center's disaster response and outline the plans to address them. *[Text box]*

2.3 - Disaster Management Planning (Type II)

Enter the dates and nature of drills or activations completed during the Reporting Period in the table below

Description of Event				
Drill or Activation				
Date				