

Patient characteristics

33	<p>What was the estimated number of population at risk from the major incident? (e.g. number of passengers on a train / ship) Please explain how the above number of population at risk was reached?</p>
34	<p>Gender <input type="checkbox"/> Males <input type="checkbox"/> Females <input type="checkbox"/> Unidentified/missing victims at the time of writing this report <i>For each category please provide the number and if the numbers are estimated or exact.</i></p>
35	<p>Were there children requiring the attention of EMS? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown <i>If yes number of:</i> <input type="checkbox"/> Neonates (0-30 days) <input type="checkbox"/> Infants (1 month-2 years) <input type="checkbox"/> Young child (2-6 years) <input type="checkbox"/> Adolescent (12-18 years) <i>For each category please state if the number is estimated or exact.</i></p>
36	<p>What was the number of deaths on-scene before any medical care was provided?</p>
37	<p>What was the number of deaths after initial treatment, but before transport to hospital was started?</p>
38	<p>What was the number of deaths upon arrival at hospital, but for whom pre-hospital care and transport had been initiated?</p>
39	<p>If available: what was the 30-day mortality of those admitted to hospital? Please state whether figures are estimated or exact, and if data collection of 30-day mortality of those admitted to hospital is considered complete.</p>
40	<p>Was a pre-hospital on- scene triage system used during the major incident response? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown <i>If yes:</i> Who performed the on-scene pre-hospital triage? <input type="checkbox"/> Physician <input type="checkbox"/> EMS personnel <input type="checkbox"/> Other. Please specify. Which triage system was used?</p>
41	<p>Number of patients in each category upon first assessment on scene <input type="checkbox"/> Red = immediate <input type="checkbox"/> Yellow = urgent <input type="checkbox"/> Green = minor/delayed <input type="checkbox"/> Black = deceased <input type="checkbox"/> Other categories? Please specify. <i>For each category please specify if the numbers are estimated or exact and please provide the data source from which these numbers originate.</i></p>
42	<p>Were any patients attended by EMS or medical staff at a primary health care facility and not admitted to hospital? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown <i>If yes:</i> <i>How many patients sustained minor injuries? Is the number given estimated or exact and from which data source do these numbers originate?</i></p>
43	<p>Was there any over-or undertriage? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown <i>If yes: what was the % of overtriage, what was the % of undertriage. Please state any definition for triage precision calculations as well as the data source.</i></p>
44	<p>What was the total number of patients seeking care at a hospital? What was the total number of patients admitted to hospital? How many of the admitted patients were discharged within 24 hours? <i>Please state whether figures are estimated or exact and provide the data source (e.g.: hospital records).</i></p>

45	<p>Did any patients sustain the following types of injury?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Blunt trauma <input type="checkbox"/> Penetrating trauma <input type="checkbox"/> Burns <input type="checkbox"/> Drowning <input type="checkbox"/> Asphyxiation <input type="checkbox"/> Hypothermia <input type="checkbox"/> Intoxication/poisoning <input type="checkbox"/> Infectious disease <input type="checkbox"/> Acute psychiatric symptoms <input type="checkbox"/> Nuclear or radiological injury <input type="checkbox"/> Biological injury <input type="checkbox"/> Chemical injury <input type="checkbox"/> Other types of injury <p><i>If possible: for each ticked alternative please specify the number, if the number is estimated or exact and please state the data source for which the numbers derive.</i></p>
46	<p>Were any patients admitted to critical care area?</p> <ul style="list-style-type: none"> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown <p><i>If yes:</i> <i>Please state the number of patients admitted to critical care area, if the number is estimated or exact and state the data source.</i> <i>Please explain how you define critical care.</i></p>