



HICS 201 - INCIDENT BRIEFING

1. Incident Name	2. Operational Period (#) DATE: FROM: _____ TO: _____ TIME: FROM: _____ TO: _____
3. Situation Summary (for briefings or transfer of command)	
4. Health and Safety Briefing Identify potential incident health and safety hazards and implement necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards. (Summary of HICS 215A)	
5. Map / Sketch (Attach sketch showing the total area of operations, the incident site/area, impacted and threatened areas, and/or other graphics depicting situational status and resource assignment, as needed.) <input type="checkbox"/> See Attached	



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6. Current Hospital Incident Management Team (fill in additional positions as appropriate)



