Texas Emergency Medical Task Force TASK BOOK

AMBUS Crew Member

Member Name
Sponsoring Department
EMTF Region
Home Regional Advisory Council
Date Started





AMBUS Crew Member

Signatures								
Member Name: EMTF								
	Contact N	Number: (_						
Please READ and understand before Initialing a Task Book for a Trainee. Sign below to validate initials when complete.								
			ted by me have been perforn					
	supervision in a satisfactory manner by the above-named trainee.							
Initials	Evaluator's Name (Print)	EMTF#	Incident/Disaster/ Exercise Position Title:	Event Name or Location	Date:			
Initials	tials Regional EMTF Coordinator (Acknowledge Receipt of Task Book)							
	Submit completed Tasl	k Book to Re	gional EMTF Coordinator	Date:				
Initials	Initials Crew Chief							
	Sign-off of Crew Chief for final approval Date:							
Initials	Initials Task Book Oversight Committee							
	Task Book Oversight Co	Date:						

AMBUS Crew Member

	Member Name:	EMTF							
	Contact Number: ()								
Operations									
Initials	Evaluator								
	Attend AMBUS Orientation	Date:	. 0						
	Demonstrate ability to use all radios on the vehicle	Date:	0						
	Assist with Interior Safety Check:								
	Attach Completed Safety Check Sheet	Date:	0						
	Attach Completed Safety Check Sheet	Date:	0						
	Assist with Exterior Safety Check:								
	Attach Completed Safety Check Sheet	Date:	0						
	Attach Completed Safety Check Sheet	Date:	0						
	Participate in full setup and demobilization of ramp	Date:	. 0						
	Participate in loading of stretcher patients	Date:	0						
	Participate in loading of seated patients	Date:	0						
	Participate in loading and securing wheelchair patients	Date:	0						
	Demonstrate proper use of Wireless Vital Sign Monitors	Date:	0						
	Demonstrate proper procedure to place a patient on oxygen	Date:	0						
	Participate in a Safety Orientation for mobile Generator	Date:	0						
	Demobilization								
Initials	Evaluator								
	Assist in pre-trip safety check of vehicle	Date:	. 0						
	Properly inventory the vehicle after the deployment and prepare list for restock	Date:	0						
	Properly check the level of oxygen in each of the onboard tanks	Date:	0						
	Properly complete required deployment paperwork and give to Crew Chief	Date:	. 0						
0	Task can be completed in any situation		Legend Code						
ı	Task must be performed on an Incident	Legend Cod							
E	Task must be performed on an Exercise or during Training Rare event – The evaluation assignment may not provide opportunities	e to domanetrate performance	Tho						
R	evaluator may be able to determine skills/knowledge through interviewarrange for another assignment or a simulation.								