

# Typed Resource Definitions

## Health and Medical Resources



FEMA 508-5

**May 2005**



- Background** The National Mutual Aid and Resource Management Initiative supports the National Incident Management System (NIMS) by establishing a comprehensive, integrated national mutual aid and resource management system that provides the basis to type, order, and track all (Federal, State, and local) response assets.
- Resource Typing** For ease of ordering and tracking, response assets need to be categorized via resource typing. Resource typing is the categorization and description of resources that are commonly exchanged in disasters via mutual aid, by capacity and/or capability. Through resource typing, disciplines examine resources and identify the capabilities of a resource's components (i.e., personnel, equipment, training). During a disaster, an emergency manager knows what capability a resource needs to have to respond efficiently and effectively. Resource typing definitions will help define resource capabilities for ease of ordering and mobilization during a disaster. As a result of the resource typing process, a resource's capability is readily defined and an emergency manager is able to effectively and efficiently request and receive resources through mutual aid during times of disaster.
- Web Site** For more information, you can also refer to the National Mutual Aid and Resource Management Web site located at:  
[http://www.fema.gov/nims/mutual\\_aid.shtm](http://www.fema.gov/nims/mutual_aid.shtm).

- Supersedure** This document replaces the Health and Medical resource definition section in *Resource Definitions*, dated September 2004
- Changes** Document is reformatted. Content is unchanged.

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<b>RESOURCE: Disaster Medical Assistance Team (DMAT)—Basic</b>							
<b>CATEGORY:</b>		Health & Medical (ESF #8)			<b>KIND:</b>	Team	
<b>MINIMUM CAPABILITIES:</b>		<b>TYPE I</b>	<b>TYPE II</b>	<b>TYPE III</b>	<b>TYPE IV</b>	<b>OTHER</b>	
<b>COMPONENT</b>	<b>METRIC</b>						
Team See Note 1	Patient-care Capabilities	Same as Type II	Triage and treat up to 250 patients per day for up to 3 days without resupply	Augment or supplement Type I or II team within this team's local area	Personnel may be used to supplement other teams		
Team Readiness	Roster Fulfillment, Equipment Loading	Upon alert, full 35-person roster within 4 hrs. After activation, deployment ready within 6 hrs	Upon alert, full roster within 6 hrs. After activation, deployment ready within 12 hrs	Upon alert, 75% rostered within 12 hrs. After activation, deployment ready within 24 hrs	Does not meet minimal deployable team requirements		
Demonstrated Readiness	Readiness Testing and Deployment History	Same as Type II plus: History of prior full deployment to austere environment	100% rating on NDMS readiness test in past 12 mos	75% or greater rating on NDMS readiness test in past 12 mos	Less than Type III		
Personnel See Note 2	Membership Level	105 or more deployable team personnel on NDMS roster 12 or more physicians; 3 or more of each of PA or NP, RN, RPh, and paramedic	90 or more deployable team personnel on NDMS roster 9 or more physicians; 3 or more of each of PA or NP, RN, RPh, and paramedic	50 or more deployable team personnel on NDMS roster 6 or more physicians; 2 or more of each of PA or NP, RN, RPh, and paramedic	Less than Type III		
Equipment and Supplies	Logistics Status	Same as Type II	Full DMAT equipment cache properly managed, stored and inventoried per NDMS requirements	Full or partial DMAT equipment cache properly managed, stored, and inventoried per NDMS requirements	Less than partial cache		
Vehicle	Transportation Status	Same as Type II	Pre-arrangement for obtaining primary and alternate use vehicles	Incomplete transportation arrangements	None		
Didactic Training	Basic (Core) and Advanced Training Modules	90% completion of NDMS basic core training plus 50% of advanced training modules (By 08/05)	80% completion of NDMS basic core training plus 25% of advanced training modules (By 08/05)	50% completion of NDMS basic core training plus 25% of advanced training modules (By 08/05)	Less than Type III		



RESOURCE: Disaster Medical Assistance Team (DMAT)—Basic							
CATEGORY:		Health & Medical (ESF #8)			KIND:		Team
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER	
COMPONENT	METRIC						
Training experience	Field Exercises (FEXs)	Same as Type II	Participate in at least 2 NDMS approved FEXs, one observed	Participate in at least 1 NDMS approved FEX	N/A		
<b>COMMENTS:</b>	<p>Definition: A DMAT is a volunteer group of medical and nonmedical individuals, usually from the same State or region of a State, who have formed a response team under the guidance of the National Disaster Medical System, or under similar State or local auspices.</p> <p><b>Note 1:</b> Type I = fully operational; Type II = operational ; Type III = augmentation/local team; Type IV = developmental.</p> <p><b>Note 2:</b> Standard DMAT deploys with 35 personnel for all missions. Personnel include a mix of physicians, nurses (RN), nurse practitioners (NP), physicians' assistants (PA), pharmacists (RPh), emergency medical technicians (EMT), other allied health professionals, and support staff.</p>						



RESOURCE: Disaster Medical Assistance Team (DMAT)—Burn Specialty							
CATEGORY:		Health & Medical (ESF #8)			KIND:	Team	
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER	
COMPONENT	METRIC						
Team See Note 1	Deployment Readiness; Staffing; Equipment Status; Training Status; Patient Treatment Capacity	Deploy to site within 24 hrs. of notification with all necessary staff and equipment; Function for 72 hrs. in austere locations without resupply	Deploy to site within 24 hrs. of notification with all necessary staff; Function in existing fixed facility using facility's equipment and supplies (Note 2)	Personnel roster only; May be less than full complement			
Equipment	Logistics Status	Full complement	Limited to specialized items for burns	None			
<b>COMMENTS:</b>	<p>A Burn Specialty DMAT is a volunteer group of medical and nonmedical individuals, usually from the same state or region of a state, that have formed a response team under the guidance of the National Disaster Medical System (or state or local auspices), and whose personnel have specific training/skills in the management of burn trauma patients.</p> <p><b>Note 1:</b> Variable number of personnel; includes medical providers with specialty training/skills in management of burn patients. Usually includes a mix of physicians, nurses, nurse practitioners, physician's assistants, pharmacists, emergency medical technicians, other allied health professionals and support staff. Deployment rosters are usually constituted on an ad hoc basis, depending on situational need.</p> <p><b>Note 2:</b> Current NDMS burn teams are Type II; they are not fully equipped teams, but rather they usually co-deploy, providing specialized equipment, supplies and skills on those missions that involve burn casualties.</p>						



RESOURCE: Disaster Medical Assistance Team (DMAT)—Crush Injury Specialty							
CATEGORY:		Health & Medical (ESF #8)			KIND:	Team	
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER	
COMPONENT	METRIC						
Team See Note 1	Deployment Readiness; Staffing; Equipment Status; Training Status; Patient Treatment Capacity	Deploy to site within 24 hrs. of notification with all necessary staff and equipment; Function for 72 hrs. in austere locations without resupply	Deploy to site within 24 hrs. of notification with all necessary staff; Function in existing facility using facility's equipment and supplies See Note 2	Personnel roster only; May be less than full complement			
Equipment	Logistics status	Full complement	Limited or none	None			
<b>COMMENTS:</b>	<p>A Crush Injury Specialty DMAT is a volunteer group of medical and nonmedical individuals, usually from the same State or region of a State, who have formed a response team under the guidance of the National Disaster Medical System (or State or local auspices), and whose personnel have specific training/skills in the management of crush injury patients.</p> <p><b>Note 1:</b> Variable number of personnel; includes medical providers with specialty training/skills in management of crush injuries. Usually includes a mix of physicians, nurses, nurse practitioners, physician's assistants, pharmacists, emergency medical technicians, other allied health professionals and support staff. Deployment rosters are usually constituted on an ad hoc basis, depending on situational need.</p> <p><b>Note 2:</b> Current NDMS crush injury teams are Type II.</p>						



RESOURCE: Disaster Medical Assistance Team (DMAT)—Mental Health Specialty							
CATEGORY:		Health & Medical (ESF #8)			KIND:	Team	
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER	
COMPONENT	METRIC						
Team See Note 1	Deployment readiness; Staffing; Patient Treatment Capacity	Deploy to site within 24 hrs. of notification with all necessary staff and equipment  Function for 72 hrs. in austere locations without resupply	Deploy to site within 24 hrs. of notification with all necessary staff  Function in existing facility using facility's equipment and supplies  See Note 2	Personnel roster only  May be less than full complement			
Equipment	Logistics Status	Full complement	Limited or none	None			
<b>COMMENTS:</b>	<p>A Mental Health Specialty DMAT is a volunteer group of medical and nonmedical individuals, usually from the same State or region of a State, who have formed a response team under the guidance of the National Disaster Medical System (or State or local auspices), and whose personnel have specific training/skills in the management of psychiatric patients.</p> <p><b>Note 1:</b> Variable number of deploying personnel; includes medical providers with specialty training/skills in treating psychiatric patients. Usually includes a mix of physicians, nurses, nurse practitioners, physician's assistants, pharmacists, emergency medical technicians, other allied health professionals and support staff. Deployment rosters are usually constituted on an ad hoc basis, depending on situational need.</p> <p><b>Note 2:</b> Current NDMS mental health teams are Type II.</p>						





RESOURCE: Disaster Medical Assistance Team (DMAT)—Pediatric Specialty						
CATEGORY: Health & Medical (ESF #8)			KIND: Team			
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER
COMPONENT	METRIC					
Team See Note 1	Deployment Readiness; Staffing; Patient Treatment Capacity	Deploy to site within 24 hrs. of notification with all necessary staff and equipment  Function for 72 hrs. in austere locations without resupply	Deploy to site within 24 hrs. of notification with all necessary staff  Function in existing facility using facility's equipment and supplies  See Note 2	Personnel roster only  May be less than full complement		
Equipment	Logistics status	Full complement	Limited to pediatric items or none	None		
<b>COMMENTS:</b>	<p>A Pediatric Specialty DMAT is a volunteer group of medical and nonmedical individuals, usually from the same State or region of a State, who have formed a response team under the guidance of the National Disaster Medical System (or State or local auspices), and whose personnel have specific training/skills in the management of pediatric patients.</p> <p><b>Note 1:</b> Variable number of deploying personnel; includes medical providers with specialty training/skills in pediatrics and use of pediatric equipment. Usually includes a mix of physicians, nurses, nurse practitioners, physician's assistants, pharmacists, emergency medical technicians, other allied health professionals and support staff. Deployment rosters are usually constituted on an ad hoc basis, depending on situational need.</p> <p><b>Note 2:</b> Current NDMS pediatric teams are Type II; they do not deploy as a fully functioning team but generally codeploy and augment another team.</p>					



RESOURCE: Disaster Mortuary Operational Response Team (DMORT)						
CATEGORY:		Health & Medical (ESF #8)			KIND:	Team
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER
COMPONENT	METRIC					
Standard Team See Note 1	Deployment Readiness, Patient Treatment Capacity	Deploy to site within 24 hrs. of notification  Provide on-site victim identification and morgue operations  Provide family assistance services  See Note 2				
WMD Team	Deployment Readiness, Patient Treatment Capacity	DMORT - WMD is the same as above except adds additional capability to deal with residually contaminated chemical, biological, or radiological dead				
Personnel	DMORT functions	Add-on Deployable Portable Morgue Unit (DPMU) when no local morgue facilities available  Fully equipped to support either standard DMORT or DMORT-WMD.  See Note 3				
<b>COMMENTS:</b>	<p>A Disaster Mortuary Operational Response Team is a volunteer group of medical and forensic personnel, usually from the same geographic region, who have formed a response team under the guidance of the National Disaster Medical System (or State or local auspices), and whose personnel have specific training/skills in victim identification, mortuary services, and forensic pathology and anthropology methods.</p> <p><b>Note 1:</b> Standard DMORT has 31 personnel plus basic load of equipment. Usually includes a mix of medical examiners, coroners, pathologists, forensic anthropologists, medical records technicians, fingerprint technicians, forensic odontologists, dental assistants, radiologists, funeral directors, mental health professionals, and support personnel.</p> <p><b>Note 2:</b> DMORTs are mission tailored on an ad hoc basis, and usually deploy only with personnel and equipment specifically required for current mission.</p> <p><b>Note 3:</b> There are currently two Portable Morgue Units within NDMS.</p>					

RESOURCE: International Medical Surgical Response Team (IMSuRT)							
CATEGORY:		Health & Medical (ESF #8)			KIND:	Team	
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER	
COMPONENT	METRIC						
Team See Note 1	Deployment Readiness; Staffing; Patient Treatment Capacity	Able to begin deployment to OCONUS location within 3 hrs. of notification  Staff 2 OR suites providing emergency surgery, treatment, and stabilization  Usually deploys with all necessary equipment  See Note 2	Some mix of capabilities less than Type I				
Equipment	Logistics	Fully equipped to provide free-standing surgical capability, etc.  See Note 2	Limited to none				
<b>COMMENTS:</b>	Definition: An International Medical/Surgical Response Team is a volunteer group of medical and nonmedical individuals, usually from the same State or region of a State, that have formed a response team under the guidance of the National Disaster Medical System and the State Department, and whose personnel and equipment give it deployable medical and surgical treatment capability, worldwide.  <b>Note 1:</b> IMSuRT is equipped and trained to provide surgical care outside CONUS. Full team consists of roughly 26 personnel. This is the only NDMS medical team with surgical OR capability. Currently a single IMSuRT exists at level 1, being a successor to the previous IST specialty DMAT. Two additional teams are being formed.  <b>Note 2:</b> IMSuRT does not usually function in an austere environment without additional support.						



RESOURCE: NDMS Management Support Team (MST)						
CATEGORY: Health & Medical (ESF #8)			KIND: Team			
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER
COMPONENT	METRIC					
Personnel See Note 1	Deployment Staffing Treatment Capacity	Deploy to site within 24 hrs. of notification  Provide Federal supervision, coordination, and support at site of any NDMS team deployment, to include ambulatory care (sick call) for federal personnel See Note 2	Deploy to site within 24 hrs. of notification with limited staff and communications equipment, but no tentage  See Note 2			
Equipment	Logistics	Full complement	Communication and administration only			
<b>COMMENTS:</b>	<p>An MST is a command and control team that provides support and liaison functions for other NDMS teams in the field.</p> <p><b>Note 1:</b> Supervisory, Logistics, Communications, and Other Support Personnel. MSTs are normally staffed by a mix of Federal employees from NDMS headquarters, the PHS-2 team, or the CCRF. Although rostered, MSTs do not exist except when actually deployed in support of a mission. An MST (perhaps as small as one or two individuals) always accompanies an NDMS unit on a deployment.</p> <p><b>Note 2:</b> MSTs are mission-tailored on an ad hoc basis, and usually deploy only with personnel and equipment specifically required for current support mission.</p>					



RESOURCE: <b>Veterinary Medical Assistance Team (VMAT)</b>						
CATEGORY: Animals and Agriculture Issues			KIND: Team			
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER
COMPONENT	METRIC					
Team See Note 1	Deployment Staffing Treatment Capacity	Deploy to site within 24 hrs. of notification Provide animal care, treatment, and shelter Food and water testing Basic epidemiologic capabilities See Note 2	Some mix of capabilities less than Type I			
Equipment	Logistics Status	Full complement	Limited or none			
<b>COMMENTS:</b>	<p>Veterinary Medical Assistance Teams (VMATs) are volunteer teams of veterinarians, technicians, and support personnel, usually from the same region, who have organized a response team under the guidance of the American Veterinary Medical Association and the NDMS, and whose personnel have specific training in responding to animal casualties and/or animal disease outbreaks during a disaster.</p> <p><b>Note 1:</b> 60 personnel plus equipment. Usually includes a mix of veterinarians, veterinary technicians, support personnel, microbiologists, epidemiologists, and veterinary pathologists.</p> <p><b>Note 2:</b> VMATs are usually mission tailored on an ad hoc basis, and usually deploy only with personnel and equipment specifically required for the current mission. All VMATs within NDMS are considered Type 1. Epidemiologic capabilities are limited.</p>					