## **HICS 214 - ACTIVITY LOG**

| 1. Incident Name            | 2. Operational Period (# )                           |
|-----------------------------|--|
|                             | DATE: FROM: TO:                                      |
|                             | TIME: FROM: TO:                                      |
| 3. Name                     | 4. Hospital Incident Management Team (HIMT) Position |
| 5. Activity Log             |  |
| DATE / TIME                 | NOTABLE ACTIVITIES                                   |
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| 6. Prepared by  PRINT NAME: | SIGNATURE:   |
| DATE/TIME:                  | FACILITY:  |
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## **HICS 214 - ACTIVITY LOG**

**PURPOSE:** The HICS 214 - Activity Log records details of notable activities for any Hospital Incident

Management Team (HIMT) position. These logs provide basic documentation of incident activity, and a reference for any After Action Report (AAR). Personnel should document how relevant incident activities are occurring and progressing, or any notable activities,

actions taken and decisions made.

**ORIGINATION:** Initiated and maintained by personnel in HIMT positions as it is needed or appropriate.

**COPIES TO:** A completed HICS 214 must be submitted to the Documentation Unit Leader. Individuals

may retain a copy for their own records.

NOTES: Multiple pages can be used if needed. If additional pages are needed, use a blank HICS

214 and repaginate as needed. Additions may be made to the form to meet the

organization's needs.

| NUMBER | TITLE              | INSTRUCTIONS  |
|--------|--------------------|---|
| 1      | Incident Name      | Enter the name assigned to the incident.  |
| 2      | Operational Period | Enter the start date (m/d/y) and time (24-hour clock) and end date and time for the operational period to which the form applies.   |
| 3      | Name               | Print the name of the person for whom the activities are being documented.  |
| 4      | HIMT Position      | Enter the Hospital Incident Management Team (HIMT) position for which the activities are being documented.  |
| 5      | Activity Log       | Enter the time (24-hour clock) and briefly describe individual notable activities. Note the date (m/d/y), as well as if the operational period covers more than one day.  |
|        |                    | Activities described may include notable occurrences or events such as task assignments, task completions, injuries, difficulties encountered, information received, etc. |
|        |                    | This block can also be used to track personal work activities by adding columns such as "Action Required," "Delegated To," "Status," etc.                                 |
| 6      | Prepared by        | Enter the name and signature of the person preparing the form. Enter date (m/d/y), time prepared (24-hour clock), and facility.   |

