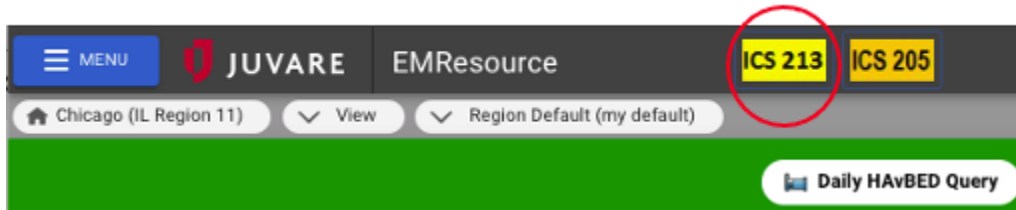
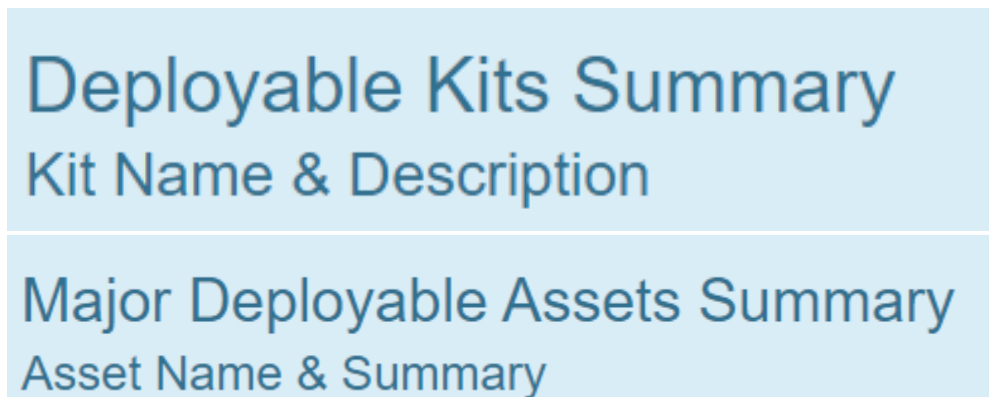


EMResource 213 Resource Request Form Quick Guide



1. Click on ICS 213 at the top of your EMResource Dashboard. The form will open in a new window.



PLEASE NOTE: A list of available items, and accompanying descriptions, are included at the bottom of the form for your reference. If you have any questions about the items on the list, please reach out to the CDPH PHEOC (CDPHPHEOC@cityofchicago.org).

☰ Incident Information

☰ Incident Information

☰ Is this resource request related to an active or pending incident? *

☰ Is the event a large city event or a hospital-specific event?

☰ Incident / Event Name

☰ Incident Date/Time🕒

2. Complete the Incident Information section. Please note that if you answer NO to Question 1 (meaning your request is NOT related to an incident), you do not need to complete the rest of the questions in this section.

☰ Resource Request Specific Information

☰ Point of Contact

☰ Name * ⓘ

☰ Requestor's Title * ⓘ

☰ Organization/ Facility * ⓘ

☰ E-mail *

☰ Phone Number *

☰ Requested Delivery Location * ⓘ

☰ How soon do you need the resource(s)? * ⓘ

☰ Justification for Resource * ⓘ

3. Complete the Contact Information, including Resource Delivery location (please be as specific as possible), how soon you need the requested resource, and a justification for the resource request.

	Item Name *	Category *	Type
Item 1	<input type="text" value="Ventilator"/>	<input type="text" value="Major Deployable Asset"/>	<input type="text"/>
Item 2	<input type="text" value="Burn Kit - 10 Patient"/>	<input type="text" value="Deployable Kit"/>	<input type="text"/>

4. Type in the name of the item(s) you are requesting, select the category of item from the dropdown, then provide the type, or specification, of the item being requested, if applicable (i.e., Adult, Pediatric). **Please use a new Item Line for each item being requested.**



PRO TIP: If you are unsure how to answer a question, hover over the small question mark by each question for more guidance.

Detailed Description * ?

Quantity * ?

<input type="text" value="Hamilton C-1 Ventilator with <u>BiPAP</u> capabilities"/>	<input type="text" value="2"/>
<input type="text" value="N/A"/>	<input type="text" value="1"/>

5. Write in a detailed description of the item you are requesting, if necessary, then include the quantity of the item. If you are requesting a Deployable Kit, you may only request one (1) at a time. If you need more than one of the same type of kit, please reach out to the CDPH PHEOC (CDPHPHEOC@cityofchicago.org).

6. Click "Submit".