

**BURBANK UNIFIED SCHOOL DISTRICT
EMERGENCY OPERATIONS**

MEDICAL TREATMENT TEAM

Team Leader _____

Names

Treatment Area Personnel

“IMMEDIATE”

1. _____

2. _____

3. _____

Recordkeeper: _____

“DELAYED”

1. _____

2. _____

3. _____

Recordkeeper: _____

“MINOR”

1. _____

2. _____

3. _____

Recordkeeper: _____