COMMUNITY EMERGENCY COMMUNITY EMERGENCY RESPONSE TEAM	CERT Triage Form Charleston County CERT			
CHARLESTON COUNTY	Team #	Completed By:		
	Victim Status			
	Immediate (I)	Delayed (D)	Minor (M)	Dead
Location				
A:				
В:				
С:				
D:				
Total Victims From All Locations	Total	Total	Total	Total
#	#	#	#	#

Forward completed form to Medical Group Leader