

STATE OF NORTH CAROLINA
DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

North Carolina Needs You – Please Volunteer as a Health Care Worker!

We are facing an unprecedented crisis from COVID-19 that has already had devastating consequences internationally. With the virus now spreading in North Carolina, we need to bolster our health care system to ensure we can care for those impacted by the virus. A crucial part of that effort is recruiting volunteers to supplement our health care workforce. We are asking for your help to meet these needs.

North Carolina has built a medical response capability through our state's Health Care Coalitions (HCCs) that can augment all levels of care to citizens affected by a disaster event. The capability includes medical supplies and equipment, as well as volunteer health care and medical professionals who are willing to deploy to affected areas or facilities to provide patient care. This response is provided through the State Medical Response System (SMRS), which recruits and manages volunteers in the following areas:

- **Clinical** (physicians, advanced care providers, nurses, EMS)
- **Clinical Support** (pharmacy, imaging and respiratory care)
- **Non-clinical support** (facility maintenance, safety, and administrative)

We are also asking volunteers to **provide medical supplies if they are able**, including personal protective equipment.

If you are able to volunteer, please register through the NC Training, Exercise, and Response Management System (NC TERMS). That system can be accessed through: <https://terms.ncem.org/TRS/>.

Once you create a personal profile, you will need to access the request for team membership from the response profile page. Click join a team; select ESF8 – Public Health and Medical Services; then select COVID 19 Medical Response Volunteers. From there you will need to select the team you wish to join and click "Request Membership." As we need your help to respond to the evolving crisis, you will be vetted then onboarded through Temp Solutions, the temporary staffing agency of NC Office of Human Resources prior to assignment. According to NC General Statute 166A individuals providing health care services as part of a State Medical Assistance Team designated by the North Carolina Office of Emergency Medical Services will be considered an "emergency management worker" and will be subject to the Immunity and Liability provisions outlined in 166A-19.60.

Local Health care Facilities affected by COVID-19 and in need of support can request assistance through their local (county) Emergency Management program. Local (county) Emergency Managers may have the ability to fulfill the support requested within the county. State operated facilities should work through their state agency to route staffing support through their agency to the State Emergency Operations Center. Health care facilities seeking assistance should work with their local county Emergency Managers and be prepared to provide detailed information of the need (avoid requesting specific assets to allow maximum flexibility and increase the likelihood that the request can be filled). Depending upon the type of request and the scope of the event, an affected facility may receive help from any or all of the HCCs. All requests for assistance, including supplies, equipment or personnel, are reviewed by the HCCs, Office of Emergency Management Services (OEMS) and North Carolina Emergency Management (NCEM).

Thank you for your commitment to protecting the health and wellbeing of all North Carolinians.

A handwritten signature in cursive script, reading "Mandy K Cohen".

Mandy Cohen MD, MPH
Secretary



NC TERMS




Creating a Profile &
Volunteering to Help in TERMS

<https://terms.ncem.org/TRS/>




CREATING A TERMS ACCOUNT

Start off by heading to the North Carolina TERMS Home Page. Once at the site, click on "Create Account Now".



NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



One account to register for trainings, exercises and response activities.

Have an Account? [Log In](#)

[Create Account Now](#)

Trainings & Exercises

Register for training courses and exercises.

- » [Calendar](#)
- » [Online Training](#)

Response

Register to provide services during a disaster or emergency situation.

Announcements

TERMS Team Management Update

While we are in the process of implementing all of the new features of TERMS Team Management, we ask that you **not** request a credential through the system until we finish building them out. Requested credentials will not be reviewed until the system is updated in the next 2-3 months and requests may be lost as updates are rolled out. This notice will be updated when that piece is complete and we can begin processing credential requests. (Updated 3/22/2019)

2019 Central Branch Training Week

Central Branch Training Week is scheduled for August 5-9 at Central Carolina Community College in Sanford. Registration is open in TERMS now! Hotel information has been added to each class posting. Download the [flyer](#) and [class grid](#) for more information.


NC Response Partners,

Welcome to the new and improved NC Training - Exercise - Response Management System (NC TERMS). We are excited to roll out significant updates to this vital preparedness and response tool. You will notice an updated look as well as an improved workflow in the new system. The biggest addition is a new Team Management Module where you can now manage your own response profile, volunteer to participate in many of the state response programs, and manage your training and credentials within the TERMS system. In the coming months, additional functionality will be released that will allow team members and managers to communicate as well as roster response resources within the system to respond across the state in times of need.

As this new system comes online, we will be offering additional training to end users.

Training Partner Links

- ▼ Federal Training Partners
- ▼ State Training Partners

 Get Adobe Reader



FIRST TIME REGISTRATION

Fill out the required information and click "Continue".



NORTH CAROLINA TERMS TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



Training, Exercise & Response Management System

First Time Registration

Please input the required information and press Continue so that we may first check for an existing account.

*First Name

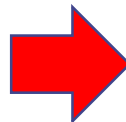
John

*Last Name

Doe

*Last 4 SSN

7892



Continue


Cancel

PERSONAL PROFILE




EMERGENCY SERVICES

Fill out the required information on the personal profile page. To get FEMA ICS Courses automatically added to your transcript you MUST add your FEMA SID (Student ID Number). To sync any EMS credential, please also add your OEMS P-Number (if applicable).



NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



[Welcome](#) [My Account](#) [Calendar](#) [Document Library](#) [Logoff](#)

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Personal Profile

John Michael Doe

Name

* First Name

Middle Name

* Last Name

Suffix

* Certificate Name

Key Identifiers used for verification

*Date of Birth

*Last 4 SSN/PIN

OEMS P-Number

Federal Student ID

Discipline/Profession

* Discipline

Law Enforcement

Profession/Position

Title

Agency Represented

Volunteer & Incident Response Team Participation

[Response Profile](#)

PERSONAL PROFILE (CONT.)



EMERGENCY SERVICES

Fill out the required information on the personal profile page

Volunteer & Incident Response Team Participation

Response Profile

Home Address

Address Line 1

229 Venturi Dr

Apt/Unit

Address Line 2

City

New Bern

State

NC

Zip Code

28560

Work Address

* Address Line 1

1636 Gold Star Dr

Suite/Unit

Address Line 2

* City

Raleigh

Other City

* State

NC

* Zip Code

27607

Contact Information

* Primary Email

johnmichaeldoe@gmail.com

* Confirm Email

johnmichaeldoe@gmail.com

Mobile Phone

919

870-4652

Mobile Carrier

AT&T

Text Message notifications require Mobile Phone and Carrier information

* Contact Preference

Email

Other Phone Numbers

* Work Phone

910

560-7945

Fax Phone

Home Phone

Login & Password

* Login ID (minimum 8 characters)

JMD01301978

* Password

* Confirm Password

PERSONAL PROFILE (CONT.)



EMERGENCY SERVICES

Fill out the required information on the personal profile page. Once finished, click "Save".

https://terms.ncem.org/TRS/personalProfile.do?menuItemid=39

Other Phone Numbers

* Work Phone	910	560-7945
Fax Phone		
Home Phone		

Login & Password

* Login ID (minimum 8 characters)
JMD01301978

* Password
[]

* Confirm Password
[]

Your password must be at least 8 characters and must include a combination of letters and numbers. You must include at least one UPPERCASE character and may include special characters. Your password may not match your Login ID.

Security Questions

# 1	What is the name of your favorite teacher?	Response 1	Ms. Evans
# 2	What is your city of birth?	Response 2	Garner, NC
# 3	What was your elementary school?	Response 3	Roger Bell Elementary School

Notifications

Notify me of Trainings and Exercises by: ☐ NCEM ☐ NCOEMS

Save

Return to Previous Page






Creating and Maintaining a Response Profile

RESPONSE PROFILE




EMERGENCY SERVICES

Click on "Response Profile" and answer the consent statements. Once the consent statements have been answered, click "Continue".



NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



Personal ProfileResponse ProfileQualificationsTraining HistoryTranscriptLogoff

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Response Profile: John Michael Doe

- * Required Information Missing
- * **Team Participation**
- * Badge
- * Home Address
- * Contact Info
- * Deployment Preferences
- * Emergency Contact
- Driver's License/ID
- Languages
- * Medical
- Skills
- * Occupation
- DEA Registration
- Licenses/Certifications
- Trainings
- Degrees & Other

Team Participation

Consent

☐ I consent to allow the State of North Carolina to collect, use and maintain my personal information.

☐ I agree to keep my profile current and up-to-date.

☐ I consent to allow the state to perform reference and background checks.


Continue

Cancel




RESPONSE PROFILE: TEAM PARTICIPATION

To request membership on a response team, click "Join a Team". Some teams elect to allow for volunteers to request membership through the system. For those teams, you can request to join through the system here. Each program maintains their own membership process and requirements.



NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



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Response Profile: John Michael Doe

* Required Information Missing

[Team Participation](#)

* Badge

* Home Address

Contact Info

* Deployment Preferences

* Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Team Participation

Credentials for Team Participation

What response team positions do you feel you are credentialed to fill?

The credentials you have on file are listed below. You may select and **Request a Credential** be added to your profile.

Request a Credential

Request for Team Membership

To request membership on a response team, click the button to Join a Team. Select one or more teams and Request Membership.

You can check the status of your requests at any time The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership

Join a Team

Membership Requests & Invitations

RESPONSE PROFILE: TEAM PARTICIPATION



Once you have clicked "Join a Team" a dropdown list of programs and teams by Emergency Support Function (ESF) will appear. Teams are organized by ESF throughout TERMS.

* Home Address

Contact Info

* Deployment Preferences

* Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

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Request Team Membership

Join a Team

ESF6 - Mass Care and Human Services

ESF7 - Logistics

ESF8 - Public Health and Medical Services

ESF9 - Search and Rescue

ESF10 - Hazardous Materials

ESF11 - Agriculture and Natural Resources


Membership Requests & Invitations


Response History

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NC.gov | ReadyNC.org | Emergency Management Program's HelpDesk: [919-825-2574](tel:919-825-2574) | NCEM Email | Healthcare Program's HelpDesk: [919-855-3812](tel:919-855-3812) | OEMS Email

North Carolina Emergency Management


DEPARTMENT OF PUBLIC SAFETY


NORTH CAROLINA

RESPONSE PROFILE: TEAM PARTICIPATION



EMERGENCY SERVICES

Click on one of the ESF categories to reveal programs within the ESF that you can request to join.

* Home Address

Contact Info

* Deployment Preferences

* Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Request for Team Participation

What response team positions do you feel you are credentialed to fill?

The credentials you have on file are listed below. You may select and [Request a Credential](#) be added to your profile.

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You can check the status of your requests at any time. The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership

Join a Team

ESF6 - Mass Care and Human Services

ESF7 - Logistics

ESF8 - Public Health and Medical Services

Ambulance Strike Teams (AST) Program

Healthcare Preparedness Coalitions

Medical Reserve Corps (MRC) Program

NC Division of Public Health Program - Epidemiology

NC Division of Public Health Program - Local Health Departments

State Medical Assistance (SMAT) Team II Program

State Medical Assistance (SMAT) Team III Program

Test Program

ESF9 - Search and Rescue

N+C
DPS
DEPARTMENT OF PUBLIC SAFETY

North Carolina Emergency Management

EMERGENCY MANAGEMENT
NORTH CAROLINA

RESPONSE PROFILE: TEAM PARTICIPATION



EMERGENCY SERVICES

Select the team you are requesting to join from the dropdown box and click "Request Membership". This will automatically send your request for review by the team manager(s).

Skills

Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Request for Team Membership

To request membership on a response team, click the button to Join a Team. Select one or more teams and Request Membership.

You can check the status of your requests at any time. The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership

Join a Team

▼ ESF6 - Mass Care and Human Services

▼ ESF7 - Logistics

▼ ESF8 - Public Health and Medical Services

▼ Ambulance Strike Teams (AST) Program

▼ COVID 19 Medical Response Volunteers

Select the Response Teams you wish to join.

Request Membership

☐ Medical Provider Personnel (PA-C, NP, MD, DO)

☐ Medical Staff Personnel (MA, CNA)

☐ Nursing Staff Personnel (RN, BSN, LPN)

☐ Prehospital Medical Personnel (EMT, EMT-A, Paramedic)

▼ Healthcare Preparedness Coalitions

▼ Medical Reserve Corps (MRC) Program

RESPONSE PROFILE: TEAM PARTICIPATION



EMERGENCY SERVICES

After requesting membership on the selected team(s), your requests will be found underneath "Membership Requests & Invitations". Invitations to join teams can also be found here.

* Required Information Missing

Team Participation

* Badge

* Home Address

Contact Info

* Deployment Preferences

* Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Team Participation

Credentials for Team Participation

What response team positions do you feel you are credentialed to fill?

The credentials you have on file are listed below. You may select and **Request a Credential** be added to your profile.

Request a Credential

Request for Team Membership

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Request Team Membership

Join a Team

Membership Requests & Invitations

Memberships Requested

Membership Invitations

Response History

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RESPONSE PROFILE: TEAM PARTICIPATION



EMERGENCY SERVICES

To see your response history, click on "Response History". This will give you the option to print your response history and see the Incident/Mission, Position, and Start-End of each event responded to.

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Response Profile: John Michael Doe

* Required Information Missing

Team Participation

* Badge

* Home Address

Contact Info

* Deployment Preferences

* Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Team Participation

Credentials for Team Participation

What response team positions do you feel you are credentialed to fill?

The credentials you have on file are listed below. You may select and **Request a Credential** be added to your profile.

Request a Credential

Request for Team Membership

To request membership on a response team, click the button to Join a Team. Select one or more teams and Request Membership.

You can check the status of your requests at any time. The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership

Join a Team

Membership Requests & Invitations

Response History

Print History

Incident/Mission	Position	Start-End
------------------	----------	-----------

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North Carolina Emergency Management

N.C. **DPS**
DEPARTMENT OF PUBLIC SAFETY


EMERGENCY MANAGEMENT
NORTH CAROLINA

RESPONSE PROFILE: BADGE




EMERGENCY SERVICES

Under "Badge Photo/Sizing Information" fill out all the required information. Insert a photograph suitable for a badge. Clothing/sizing information will help in ensuring your equipment/uniforms are sized correctly. You must be assigned to a team prior to uploading a photo for a badge and filling out badge information.



NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



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Response Profile: John Michael Doe

* Required Information Missing

- Team Participation
- * **Badge**
- * Home Address
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- * Deployment Preferences
- * Emergency Contact
- Driver's License/ID
- Languages
- * Medical
- Skills
- * Occupation
- DEA Registration
- Licenses/Certifications
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- Degrees & Other

Badge Photo/Sizing Information



Clothing/Sizing Information

Clothing/Sizing information is needed in order to ensure proper sizing of equipment and/or uniforms.

*Height-Feet	*Height-Inches	Weight	*Hat Size
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
*Pants Waist	*Pants Length	*T-Shirt	*Shoe Size
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Respirator Size/Type			
<input type="text"/>			

RESPONSE PROFILE: HOME ADDRESS



Under "Home Address" fill out all required information.

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Response Profile: John Michael Doe

* Required Information Missing

- Team Participation
- * Badge
- * **Home Address**
- Contact Info
- * Deployment Preferences
- * Emergency Contact
- Driver's License/ID
- Languages
- * Medical
- Skills
- * Occupation
- DEA Registration
- Licenses/Certifications
- Trainings
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Address

Home Address

* Address Line 1

Apt/Unit

Address Line 2

* City

* State

* Zip Code/Zip+4

Mailing Address

☒ Same as Home Address

* Address Line 1

Apt/Unit

Address Line 2

* City

* State

* Zip Code/Zip+4

Save Cancel

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RESPONSE PROFILE: CONTACT INFO



EMERGENCY SERVICES

Under "Contact Information for Team Response", fill out all required information. **For team management participants, please ensure you add SMS/Text under additional contact number if you want to receive text messages.** This applies even if this is the same as your mobile contact number.

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Response Profile: John Michael Doe

* Required Information Missing

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* Badge

* Home Address

Contact Info

* Deployment Preferences

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Skills

* Occupation

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[Degrees & Other](#)

Contact Information for Team Response

The contact email and phone numbers that you provide on this page will be used to contact you for matters related to team activity and in the event of an incident. It is critical that you keep this information current.

Primary Contact Information

* Primary Email

johnmichaeldoe@gmail.com

* Confirm Primary

johnmichaeldoe@gmail.com

Secondary Email

Confirm Secondary

Primary Phone Contact

* Contact Type

Cell

Phone Number

* Area Code

919

* Phone Number

870-465

Additional Contact Numbers

Add Number

Save

Cancel

N+C
DPS
DEPARTMENT OF PUBLIC SAFETY

North Carolina Emergency Management

EMERGENCY MANAGEMENT
NORTH CAROLINA

RESPONSE PROFILE: CONTACT INFO



EMERGENCY SERVICES

To add additional contact numbers, select "Add Number". Then provide all required information. **You must add an SMS/Text number to receive texts from the system under additional contact numbers.**

Contact Info

* Deployment Preferences

* Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Primary Contact Information

* Primary Email

johnmichaeldoe@gmail.com

* Confirm Primary

johnmichaeldoe@gmail.com

Secondary Email

Confirm Secondary

Primary Phone Contact

* Contact Type

Cell

Phone Number

* Area Code

919

* Phone Number

870-465

Additional Contact Numbers

Add Number

Save Cancel

Add a Contact Phone Number

* Contact Type

Phone Number

* Area Code

XXX

* Number

XXXXXXXX

Save Number Clear

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North Carolina Emergency Management

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Under "Deployment Preferences" fill out all required information.

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* Required Information Missing

[Team Participation](#)

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[Badge](#)

*

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*

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*

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[Driver's License/ID](#)

[Languages](#)

*

[Medical](#)

[Skills](#)

*

[Occupation](#)

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Deployment Preferences

* Where are you willing to be deployed?

☐ Local ☐ In-State ☐ Out-of-State

* How many days are you willing to be deployed?

Days

* How far from your home are you willing to be deployed?

Miles

* In the event of a declared national emergency, would you consider volunteering to work under the auspices of the Federal Government?

If you select yes, in the event of a national emergency, the information you provide will made available to the Federal Government upon its request.

* Do you hold a valid US passport

* Do you have commitments that might pose a conflict?

If YES, Describe: (maximum of 250 characters)

Save

Cancel

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NC.gov | [ReadyNC.org](#) | [Emergency Management Program's HelpDesk: 919-825-2574](#) | [NCEM Email](#) | [Healthcare Program's HelpDesk: 919-855-3812](#) | [OEMS Email](#)

RESPONSE PROFILE: EMERGENCY CONTACT



EMERGENCY SERVICES

Under "Emergency Contact", you can view your emergency contacts. You must list at least 1 emergency contact.

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Response Profile: John Michael Doe

* Required Information Missing

- Team Participation
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Emergency Contacts

[Add Emergency Contact](#)

To add an entry, press the button to Add Emergency Contact. Click the hyperlink on a listed Emergency Contact to update that entry.

Emergency Contact	Primary	Relation	Contact Numbers
-------------------	---------	----------	-----------------

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RESPONSE PROFILE: EMERGENCY CONTACT



EMERGENCY SERVICES

To add an emergency contact, click "Add Emergency Contact". Then complete all required information. Once completed, click "Save". To add multiple contacts, repeat this process.

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Response Profile: John Michael Doe

* Required Information Missing

Team Participation

* Badge

* Home Address

Contact Info

* Deployment Preferences

* **Emergency Contact**

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

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Emergency Contacts

Add Emergency Contact

To add an entry, press the button to Add Emergency Contact. Click the hyperlink on a listed Emergency Contact to update that entry.

Emergency Contact	Primary	Relation	Contact Numbers
-------------------	---------	----------	-----------------

Emergency Contact Details

☒ **Primary Emergency Contact**

* Contact Name

* Relation

Address

* Contact Number 1

Area Code

Number

Contact Number 2

Area Code

Number

Contact Number 3

Area Code

Number

Save

Cancel

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[NC.gov](#) | [ReadyNC.org](#) | Emergency Management Program's HelpDesk: [919-825-2574](#) | NCEM Email | Healthcare Program's HelpDesk: [919-855-3812](#) | OEMS Email

RESPONSE PROFILE: DRIVER'S LICENSE/ID



EMERGENCY SERVICES

Under "Driver's License/ID", fill out all required information.

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Response Profile: John Michael Doe

* Required Information Missing

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- Deployment Preferences
- Emergency Contact
- Driver's License/ID**
- Languages
- Medical
- Skills
- * Occupation
- DEA Registration
- Licenses/Certifications
- Trainings
- Degrees & Other

Driver's License/State ID

* First Name

Middle Name

* Last Name

Suffix

* State

* License/ID #

* Expiration Date

Endorsements

☐ Regular License Class A

☐ Regular License Class B

☒ Regular License Class C

☐ Commercial Driver's License Class A

☐ Commercial Driver's License Class B

☐ Commercial Driver's License Class C

☐ Certified to transport hazardous materials

☐ Federal ID/ Real Act ID Compliant

Save Cancel


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RESPONSE PROFILE: LANGUAGE SKILLS




EMERGENCY SERVICES

Under "Language Skills" you can view your language skills.



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 - * Medical
 - Skills
 - * Occupation
 - DEA Registration
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 - Degrees & Other

Language Skills

Add Language

To add an entry, press the button to Add Language. Click the hyperlink on a listed Language to update that entry.

Language	Spoken Ability	Written Ability
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RESPONSE PROFILE: LANGUAGE SKILLS



To add a language, click "Add Language". Then complete all required information. Once completed, click "Save". To add multiple languages, repeat this process.

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Response Profile: John Michael Doe

* Required Information Missing

[Team Participation](#)

* Badge

* Home Address

Contact Info

* Deployment Preferences

Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Language Skills

Add Language

To add an entry, press the button to Add Language. Click the hyperlink on a listed Language to update that entry.

Language	Spoken Ability	Written Ability
<div>Add/Update Language Skills</div> <div><div>*Language</div><div>English</div><div>▼</div></div> <div><div>*Spoken Ability</div><div>Fluent</div><div>▼</div></div> <div><div>*Written Ability</div><div>Advanced</div><div>▼</div></div>		

Save

Cancel

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RESPONSE PROFILE: MEDICAL



EMERGENCY SERVICES

Under "Medical" fill out all required information. To print your medical report, click "Print Medical Report". By completing/updating your basic medical information, your team manager can provide this information to your medical providers in the event of a medical emergency.

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Response Profile: John Michael Doe

- * Required Information Missing
- Team Participation
- * Badge
- * Home Address
- Contact Info
- * Deployment Preferences
- Emergency Contact
- Driver's License/ID
- Languages
- * **Medical**
- Skills
- * Occupation
- DEA Registration
- Licenses/Certifications
- Trainings
- Degrees & Other

Medical Information [Print Medical Report](#)

* Are you physically able to participate in field deployment? Yes

* Do you have health conditions which might prevent you from deployment in a disaster situation? No

If YES, Describe

Max of 400 characters

American with Disabilities Act

* Do you require any reasonable accommodations to perform any disaster related duties? No

If YES, Describe

Max of 400 characters

Allergies (check all that apply)

<input type="checkbox"/> Animals	<input type="checkbox"/> Food
<input type="checkbox"/> Insects/Pests	<input type="checkbox"/> Latex
<input type="checkbox"/> Medicine	<input type="checkbox"/> Other

For any allergy checked, describe the allergy and your reaction:

Max of 200 characters

RESPONSE PROFILE: MEDICAL



EMERGENCY SERVICES

Fill out all required information. The more information you provide, the more information that can be provided to your healthcare team.

Max of 200 characters

Blood Type

Hepatitis A Vaccine

Dose #1

YEAR

Dose #2

YEAR

Hepatitis A Comments

^

v

Max of 250 characters

Hepatitis B Vaccine

Dose #1

YEAR

Dose #2

YEAR

Dose #3

YEAR

Titer

Hepatitis B Comments

^

v

Max of 250 characters

Measles, Mumps, Rubella (MMR)

Dose #1

YEAR

Dose #2

YEAR

Measles Titer

YEAR

Mumps Titer

YEAR

Rubella Titer

YEAR

Have you ever had a case of
Measles, Mumps, Rubella
(MMR)?

MMR Comments

^

v

Max of 250 characters

Inactivated Polio Vaccine (IPV) or Oral Polio Vaccine (OPV)

RESPONSE PROFILE: MEDICAL



EMERGENCY SERVICES

Fill out all required information.

Max of 250 characters

Inactivated Polio Vaccine (IPV) or Oral Polio Vaccine (OPV)

Dose #1

YEAR

Dose #2

YEAR

Dose #3

YEAR

IPV/OPV Booster

YEAR

IPV/OPV Comments

Max of 250 characters

Pneumococcal Polysaccharide (Pneumonia Vaccine)

Dose #1

YEAR

Dose #2

YEAR

Pneumonia Comments

Max of 250 characters

Vaccinia (Smallpox)

Dose #1

YEAR

Was there a major take response?

Smallpox Comments

Max of 250 characters

Varicella (chickenpox)

Dose #1

YEAR

Dose #2

YEAR

IgG Antibody Titer

Have you ever had a case of Varicella (chickenpox)?


Varicella (chickenpox) Comments

Max of 250 characters


Inactivated Influenza Vaccine / Live Attenuated Influenza Vaccine (LAIV)

Vaccine received

Most Recent Dose


DEPARTMENT OF PUBLIC SAFETY

North Carolina Emergency Management


EMERGENCY MANAGEMENT
NORTH CAROLINA

RESPONSE PROFILE: MEDICAL



Fill out all required information

Max of 250 characters

Tetanus / Diphtheria (Td)

Most Recent Dose

YEAR

Td Comments

Max of 250 characters

Meningococcal Conjugate (MCV4)

Most Recent Dose

YEAR

MCV4 Comments

Max of 250 characters

Meningococcal Polysaccharide (MPSV4)

Dose #1

YEAR

Dose #2

YEAR

MPSV4 Comments

Max of 250 characters

Pertussis

Dose #1

YEAR

Dose #2

YEAR

Dose #3

YEAR

Dose #4

YEAR

Dose #5

YEAR

Pertussis Comments

Max of 250 characters

Tuberculosis Testing

Most Recent PPD

YEAR


Result of PPD

Tuberculosis Comments


Max of 250 characters

Other Immunizations

List any other immunizations that you have received


DEPARTMENT OF PUBLIC SAFETY

North Carolina Emergency Management


NORTH CAROLINA

RESPONSE PROFILE: MEDICAL



EMERGENCY SERVICES

Once you have filled out all of the required information, click "Save".

List any other immunizations that you have received

Max of 500 characters

Medical History (check all that apply)

<input type="checkbox"/> Aortic stenosis	<input type="checkbox"/> Asthma
<input type="checkbox"/> Chronic respiratory disease	<input type="checkbox"/> Myocardial infarction
<input type="checkbox"/> Other cardiac disease	<input type="checkbox"/> Other relevant medical condition
<input type="checkbox"/> Phobias to Animals	<input type="checkbox"/> Phobias to Confined Spaces
<input type="checkbox"/> Phobias to Darkness	<input type="checkbox"/> Phobias to Light
<input type="checkbox"/> Severe angina pectoris	<input type="checkbox"/> Severe musculoskeletal disease
<input type="checkbox"/> Severe obesity	<input type="checkbox"/> Skin: open sores, rash, sunburn
<input type="checkbox"/> Spontaneous pneumothorax	<input type="checkbox"/> Symptoms of fever, N/V/D, cough
<input type="checkbox"/> Uncontrolled hypertension	

Describe any Medical History options that have been checked

Max of 500 characters

Current Medications

Max of 500 characters

[Save](#) [Cancel](#)

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RESPONSE PROFILE: SKILLS



EMERGENCY SERVICES

Under "Skills", select all skills that are applicable to you. Once finished, click "Save".

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Response Profile: John Michael Doe

* Required Information Missing

- Team Participation
- * Badge
- * Home Address
- Contact Info
- * Deployment Preferences
- Emergency Contact
- Driver's License/ID
- Languages
- Medical
- Skills**
- * Occupation
- DEA Registration
- Licenses/Certifications
- Trainings
- Degrees & Other

Skills

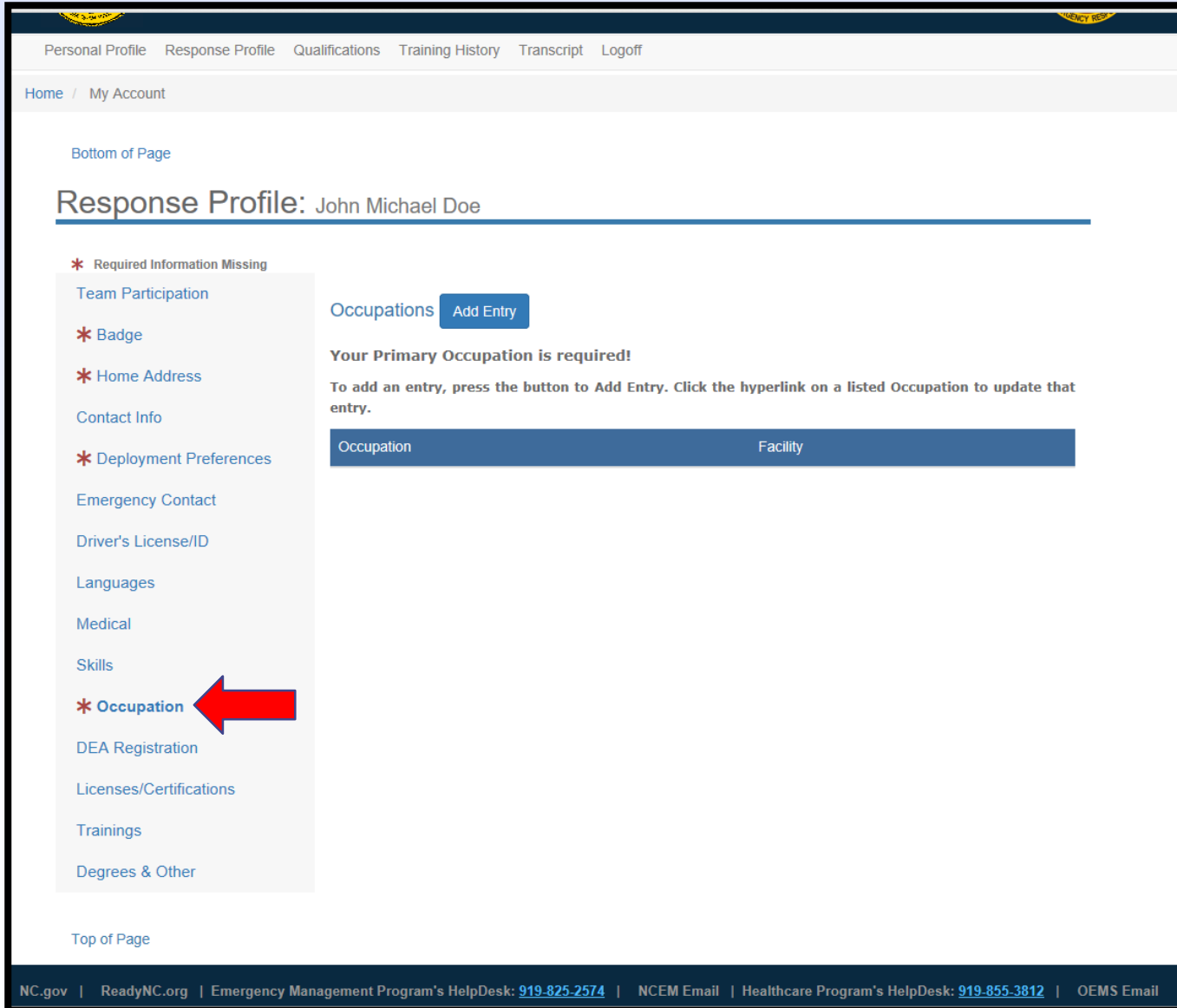
Healthcare Skills	Other Skills
<input type="checkbox"/> Animal First Aid	<input type="checkbox"/> Animal Handling
<input type="checkbox"/> Automated External Defibrillator	<input type="checkbox"/> Clerical Work
<input type="checkbox"/> Bloodborne Pathogens	<input type="checkbox"/> Community Emergency Response Team Training
<input type="checkbox"/> Cardio-pulmonary Resuscitation	<input type="checkbox"/> Computer Networking
<input type="checkbox"/> Contamination Control	<input type="checkbox"/> Data Entry
<input type="checkbox"/> Disease Surveillance	<input type="checkbox"/> Data Processing Software
<input type="checkbox"/> First Aid	<input type="checkbox"/> Farm Biosecurity
<input type="checkbox"/> Hospital Emergency ICS	<input type="checkbox"/> Forklift Operator
<input type="checkbox"/> Hospital Preparedness	<input type="checkbox"/> Inventory Management
<input type="checkbox"/> Patient Care/Positioning	<input type="checkbox"/> Loading/Shipping
<input type="checkbox"/> Radiation Physics	<input type="checkbox"/> Office Management
<input type="checkbox"/> Radiation quality assurance	<input type="checkbox"/> Personal Protection Equipment Training
<input type="checkbox"/> Radiological laboratory analyses	<input type="checkbox"/> Psychosocial Support Training
<input type="checkbox"/> Radiological Monitoring	<input type="checkbox"/> Risk Communication/Media Relations
<input type="checkbox"/> Radiology and CT	<input type="checkbox"/> Search and Rescue
<input type="checkbox"/> SNS Mass Dispensing	<input type="checkbox"/> Security/Law Enforcement
<input type="checkbox"/> Vaccination Administration	<input type="checkbox"/> Special Populations Training
<input type="checkbox"/> Vaccine Administration, Smallpox	<input type="checkbox"/> Volunteer Management
<input type="checkbox"/> Veterinary Medicine	<input type="checkbox"/> Volunteer Reception Center Training
	<input type="checkbox"/> Word Processing Software
	<input type="checkbox"/> Workforce Resilience Program Training

[Save](#) [Cancel](#)

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RESPONSE PROFILE: OCCUPATION

Under "Occupations" you can view your entered occupations. You must provide at least 1 occupation. For students or retirees, select your area of work and your status. "Retired" is an example of a status.



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Response Profile: John Michael Doe

* Required Information Missing

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- Driver's License/ID
- Languages
- Medical
- Skills
- * **Occupation**
- DEA Registration
- Licenses/Certifications
- Trainings
- Degrees & Other

Occupations [Add Entry](#)

Your Primary Occupation is required!

To add an entry, press the button to Add Entry. Click the hyperlink on a listed Occupation to update that entry.

Occupation	Facility
------------	----------

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RESPONSE PROFILE: OCCUPATION



EMERGENCY SERVICES

To add an occupation, click "Add Entry". Then fill out the required information. Once completed, select "Continue". "Professional Status" is where you can list active, retired, student, etc.

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[Medical](#)

[Skills](#)

* Occupation

[DEA Registration](#)

[Licenses/Certifications](#)

[Trainings](#)

[Degrees & Other](#)

Occupations

Add Entry

Your Primary Occupation is required!

To add an entry, press the button to Add Entry. Click the hyperlink on a listed Occupation to update that entry.

Occupation	Facility
<div><div>Occupation</div><div><div>* Type of Occupation</div><div></div></div><div><div>* Occupation</div><div></div></div><div><div>* Current Professional Status</div><div></div></div><div><div>Continue</div><div>Cancel</div></div></div>	

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RESPONSE PROFILE: OCCUPATION



EMERGENCY SERVICES

After you click "Continue", another information area will appear. Fill out all required information. Once completed, click "Save". Please enter schedule type, shift if applicable, and estimated hourly pay. This will aid in calculating personnel costs for teams deployed during disasters.

[DEA Registration](#)
[Licenses/Certifications](#)
[Trainings](#)
[Degrees & Other](#)

Employment Details

☒ This is my Primary Occupation

* Facility

* Address 1

Address 2

* City

* State * Zip Code

* Position

Employee Number

Shift & Rate Information

* Work Schedule * Shift * Hourly Rate

Fringe Rate % ☐ Overtime Exempt Estimated Daily Rate

Employment Verification

* Supervisor

* Supervisor Email

* Verification Phone Number


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RESPONSE PROFILE: OCCUPATION



EMERGENCY SERVICES

Once saved, your occupation should appear. To add another occupation, repeat the processes from the previous slides.



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Response Profile: John Michael Doe

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[Team Participation](#)

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Occupation

[DEA Registration](#)

[Licenses/Certifications](#)


[Trainings](#)


[Degrees & Other](#)

[Occupations](#) [Add Entry](#)

Your Primary Occupation is required!


To add an entry, press the button to Add Entry. Click the hyperlink on a listed Occupation to update that entry.

Occupation	Facility
Rescue Squad Worker	NCJFQ 



DEPARTMENT OF PUBLIC SAFETY

North Carolina Emergency Management



RESPONSE PROFILE: DEA REGISTRATION



EMERGENCY SERVICES

Under "DEA Registration", fill out all required information if applicable. Then click "Save". For medical providers with DEA registrations, team managers can validate your DEA registration by entering the data from your DEA registration.

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Response Profile: John Michael Doe

* Required Information Missing

- Team Participation
- * Badge
- * Home Address
- Contact Info
- * Deployment Preferences
- Emergency Contact
- Driver's License/ID
- Languages
- Medical
- Skills
- Occupation
- DEA Registration**
- Licenses/Certifications
- Trainings
- Degrees & Other

DEA Registration

* Do you currently have a DEA Registration?

Registration

Name on Registration
*For an Individual registration, enter Last Name only.
For a Business registration, enter the Business Name*

Registration Number

Have you ever involuntarily surrendered or had a federal controlled substance registration revoked, suspended, restricted, or denied?

Verification Status: **Last Attempt:**

Registration Expiration

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RESPONSE PROFILE: LICENSES/CERTIFICATIONS




EMERGENCY SERVICES

Under "Licenses/Certifications" you will be able to upload various licenses/certifications.



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Response Profile: John Michael Doe

* Required Information Missing

Team Participation

* Badge

* Home Address

Contact Info

* Deployment Preferences

* Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Team Participation

Credentials for Team Participation

What response team positions do you feel you are credentialed to fill?

The credentials you have on file are listed below. You may select and **Request a Credential** be added to your profile.

[Request a Credential](#)

Request for Team Membership

To request membership on a response team, click the button to Join a Team. Select one or more teams and Request Membership.

You can check the status of your requests at any time The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership [Join a Team](#)


Membership Requests & Invitations

RESPONSE PROFILE: LICENSESS/CERTIFICATIONS




EMERGENCY SERVICES

After selecting "Licenses/Certifications", this screen will appear. To add or register a License/Certification, click "License, Certification, Registration". License or certification must be in the system to add it. If there are licenses or certification you need to add, please contact the helpdesk to have it added to the system.



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Participant Qualifications and Credentials


Qualifications & Credentials Currently on File for: John Michael Doe

Item	Description	Status	Number	Effective	Expiration
------	-------------	--------	--------	-----------	------------

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Requests to Add Items to Transcript

You may request to add a License, Certification, Registration or Credential to your transcript. If your request is approved, the requested item will be added to your transcript. You may withdraw a request if it has a status of Requested.

[License, Certification, Registration](#)  [Request a Credential](#)

Item Type	Item Description	Requested	Request Status	Status Date
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RESPONSE PROFILE: LICENSES/CERTIFICATIONS




EMERGENCY SERVICES

After clicking "License, Certification, Registration", this screen will appear. Fill out and upload all required information. Then click "Save". To add another License, Certification, or Registration, repeat this process.



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Request to Add License, Certification, Registration

John Michael Doe
Date of Request: 07/05/2019

Name as Listed on License, Certification or Registration

* First Name	<input type="text" value="John"/>	Middle	<input type="text" value="Michael"/>
* Last Name	<input type="text" value="Doe"/>	Suffix	<input type="text"/>

Item Details

* Type of Item	<input type="text"/>		
* Select	<input type="text"/>		
Awarded By	<input type="text"/>		
Number	<input type="text"/>	Issuing State	<input type="text"/>
Issue Date	<input type="text" value="MM/DD/YYYY"/>	Expiration Date	<input type="text" value="MM/DD/YYYY"/>
* Documentation	<input type="button" value="Browse..."/>		


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RESPONSE PROFILE: LICENSES/CERTIFICATIONS




EMERGENCY SERVICES

To request a credential be added to the TERMS system, select "Request a Credential". This allows users to request a credential is the system. For the purpose of the TERMS Team Management System a credential equals a position on a team. Some credentials may be added/managed manually, however if your program chooses to utilize it end users can request credentials within their program or credentials that are turned on for requests through the system.



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TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



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Participant Qualifications and Credentials

Qualifications & Credentials Currently on File for: John Michael Doe

Item	Description	Status	Number	Effective	Expiration
------	-------------	--------	--------	-----------	------------

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Requests to Add Items to Transcript

You may request to add a License, Certification, Registration or Credential to your transcript. If your request is approved, the requested item will be added to your transcript. You may withdraw a request if it has a status of Requested.

License, Certification, RegistrationRequest a Credential

Item Type	Item Description	Requested	Request Status	Status Date
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RESPONSE PROFILE: LICENSES/CERTIFICATIONS




EMERGENCY SERVICES

After selecting "Request a Credential", this screen will appear. Fill out and upload all required information and click "Submit Request". To add another request, repeat this process.



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Request for Credential

John Michael Doe


Date of Request: 07/05/2019 Status of Request:

* Credential

Comments

Documentation

Uploaded Documents


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RESPONSE PROFILE: TEAM PARTICIPATION

To request a credential be added for Team Participation, click "Request a Credential". Some credentials are managed directly by a response program or are limited to a response program. Through this utility you can only request credentials for programs that you are a member of and is setup for individual requests. A credential is equal to a position on a response team.



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Response Profile: John Michael Doe

* Required Information Missing

Team Participation

* Badge

* Home Address

Contact Info

* Deployment Preferences

* Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Team Participation

Credentials for Team Participation

What response team positions do you feel you are credentialed to fill?

The credentials you have on file are listed below. You may select and **Request a Credential** be added to your profile.

Request a Credential

Request for Team Membership

To request membership on a response team, click the button to Join a Team. Select one or more teams and Request Membership.

You can check the status of your requests at any time The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.


Request Team MembershipJoin a Team

Membership Requests & Invitations




RESPONSE PROFILE: TEAM PARTICIPATION

Fill out and upload the required information and upload documentation of the credential. Then click "Submit Request". Not all credentials can be requested by the end user. Please contact your team/program manager for details on how your program's credentials are managed.



NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



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Request for Credential

John Michael Doe

Date of Request: 07/05/2019 Status of Request:

* Credential

Comments

Documentation

Uploaded Documents

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RESPONSE PROFILE: TRAININGS




EMERGENCY SERVICES

To view your training history or request trainings/exercises to be added to your transcript, select "Trainings". You can utilize this utility to add additional courses to your transcript. Any course you register through TERMS will be added automatically. Courses taken outside the system, but required to be tracked by your program should be added here as an upload. If the course you are looking for is not listed please contact the helpdesk for assistance.



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Response Profile: John Michael Doe

* Required Information Missing

Team Participation

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* Home Address

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* Occupation

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Licenses/Certifications

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Degrees & Other

Team Participation

Credentials for Team Participation

What response team positions do you feel you are credentialed to fill?

The credentials you have on file are listed below. You may select and **Request a Credential** be added to your profile.

Request a Credential

Request for Team Membership

To request membership on a response team, click the button to Join a Team. Select one or more teams and Request Membership.

You can check the status of your requests at any time The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership


Join a Team

Membership Requests & Invitations

RESPONSE PROFILE: TRAININGS




After selecting “Trainings”, you will be brought to this page. Here you will be able to search your registration history. You can also request trainings/exercises be added to your transcript by clicking “Add Request”.



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TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



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Training & Exercise Participation

Registration History for: John Michael Doe

By default, registrations that you have on file with a status of REGISTERED, WAIT LIST or PENDING are listed. Select a different Status (or no Status at all) and press the **Refresh Listing** button to view other/all registrations.

Registrations with a COMPLETED status and a certificate on file will include a Certificate link to access your certificate.

Filter by Status

REGISTERED, WAIT LIST or PENDING ▾

From

Thru

Order By

Earliest Start Date ▾

Refresh Listing

Back

Title/Location	Start-End	Status	CEUs	Grade
----------------	-----------	--------	------	-------

Requests to Add Trainings/Exercises to Transcript [Add Request](#)

[Show All](#)

Training/Institution	Completed	Requested	Request Status
----------------------	-----------	-----------	----------------


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RESPONSE PROFILE: TRAININGS

After selecting "Add Request", you will be brought to this screen. Fill out and upload all required information and click "Submit Request".



NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



Personal Profile Response Profile Qualifications Training History Transcript Logoff

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Add Training/Exercise to Transcript

John Michael Doe

*Title of Course/Exercise

Selection list will populate as you type in the full or partial title

*Completion Date

Institution

*Comment

Max of 250 characters

*Documentation

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RESPONSE PROFILE: DEGREES & OTHER




EMERGENCY SERVICES

Under "Degrees & Other" you will be able to add degrees and other relevant experience. To add a degree, select "Add Degree".



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Response Profile: John Michael Doe

* Required Information Missing

- Team Participation
- * Badge
- * Home Address
- Contact Info
- * Deployment Preferences
- Emergency Contact
- Driver's License/ID
- Languages
- Medical
- Skills
- * Occupation
- DEA Registration
- Licenses/Certifications
- Trainings
- Degrees & Other**

Degrees

Add Degree

To add an entry, press the button to Add Degree. Click the hyperlink on a listed Degree to update that entry.

Degree	Institution	Conferred
--------	-------------	-----------

Other Relevant Experience

Add Experience

To add an entry, press the button to Add Experience. Click the hyperlink on a listed Experience to update that entry.

Experience	Start Year	End Year
------------	------------	----------

RESPONSE PROFILE: DEGREES & OTHER



EMERGENCY SERVICES

After selecting "Add Degree", a drop down will appear. Fill out all required information and then click "Save". To add multiple degrees, repeat this process.

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Response Profile: John Michael Doe

* Required Information Missing

Team Participation

* Badge

* Home Address

Contact Info

* Deployment Preferences

Emergency Contact

Driver's License/ID

Languages

Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Degrees [Add Degree](#)

To add an entry, press the button to Add Degree. Click the hyperlink on a listed Degree to update that entry.

Degree	Institution	Conferred
--------	-------------	-----------

Degree Details

* Type of Degree

Conferred

*Month

*Year

Institution

* Name of Institution

City

State

Save

Cancel

Other Relevant Experience [Add Experience](#)

To add an entry, press the button to Add Experience. Click the hyperlink on a listed Experience to update that entry.


Experience	Start Year	End Year
------------	------------	----------

RESPONSE PROFILE: DEGREES & OTHER




EMERGENCY SERVICES

To add relevant experience, select "Add Experience".



NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



[Personal Profile](#) [Response Profile](#) [Qualifications](#) [Training History](#) [Transcript](#) [Logoff](#)

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Degree	Institution	Conferred
--------	-------------	-----------

Other Relevant Experience [Add Experience](#)

To add an entry, press the button to Add Experience. Click the hyperlink on a listed Experience to update that entry.

Experience	Start Year	End Year
------------	------------	----------

RESPONSE PROFILE: DEGREES & OTHER



EMERGENCY SERVICES

After selecting "Add Experience", a drop down will appear. Fill out all required information and then click "Save". To add more experience, repeat this process

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Other Relevant Experience [Add Experience](#)

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Experience	Start Year	End Year
------------	------------	----------

Details of Experience

* Type of Experience

* Experience

Start Year

End Year

Save

Cancel

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NC.gov | ReadyNC.org | Emergency Management Program's HelpDesk: 919-825-2574 | NCFM Email | Healthcare Program's HelpDesk: 919-855-3812 | OFMS Email

N+C
DPS
DEPARTMENT OF PUBLIC SAFETY

North Carolina Emergency Management

EMERGENCY
MANAGEMENT
NORTH CAROLINA

RESPONSE PROFILE: TRANSCRIPT



EMERGENCY SERVICES

To view your transcript, select "Transcript" from the list at the top of the page.

NORTH CAROLINA TERMS
TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM

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Response Profile: John Michael Doe

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Team Participation

Credentials for Team Participation

What response team positions do you feel you are credentialed to fill?

The credentials you have on file are listed below. You may select and **Request a Credential** be added to your profile.

[Request a Credential](#)

Request for Team Membership

To request membership on a response team, click the button to Join a Team. Select one or more teams and Request Membership.

You can check the status of your requests at any time. The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership [Join a Team](#)


Membership Requests & Invitations

RESPONSE PROFILE: TRANSCRIPT



EMERGENCY SERVICES


After selecting "Transcript" you will be brought to this page. All of your trainings and exercises should appear.




NORTH CAROLINA

Training & Exercise Registration Management System


Official Student Transcript



John Michael Doe

Date(s)	Agency	Course Code	Course Name	CEUs	Course Hrs
					

NCEM (919) 825-2263



OEMS (919) 855-3812