

Capital Area Public Health Network

Daily Situation Report

CONFIDENTIAL - FOR OFFICIAL USE ONLY

Date _____	Prepared By _____
Time _____ <i>(Military Time)</i>	Authorized By _____ <i>(not required)</i>
SitRep # #1 (then sequentially by day) _____	_____

Instructions: Briefly describe the major issues pertaining to each section. Responses from AHHRs will be condensed into the Division of Public Health Service daily Situation Report to the DHHS Incident Command Center, which is then submitted to Homeland Security and Emergency Management for inclusion in the statewide “sit-rep”. Based on the situation daily, “not applicable” or “no activity” are appropriate responses. Please do not use any formatting (bullets, numbering, bold type, etc), as these will be condensed with other reports.

Document Naming Convention: Please use mm/dd/09 and AHHR name.

Situation Overview *(Give the nature of the event and what has transpired from an emergency-response perspective.)*

Overview of Requests for Assistance Made to Capital Area Public Health Network

Operational Objectives for last Shift *(what specific tasks and priorities did you set for the AHHR)*

Operational Objectives for next 12-, 24 and 36-hours *(what specific tasks and priorities do you have for the AHHR)*

Public Affairs Issues and Needs

Other

See Attached Documents for Further Info *(List the names of the documents)*