



34865

Complete this form:
- At Baseline
(complete a separate form for each geographical entity within each unit)



Entity Characteristics

1. Date Completed: **date07**

| | | | | | | | | | |
|---------|--|---|-------|--|---|--------|--|--|--|
| | | / | | | / | | | | |
| (month) | | | (day) | | | (year) | | | |

Entity ID: **entid07**

| | | | | | | | | | |
|-----------------|--|-----------------|--|--|--|-----------------|--|-----------------|--|
| | | | | | | | | | |
| (site) | | (unit) | | | | (entiv) | | (chk) | |
| entsit07 | | entunt07 | | | | entnum07 | | entchk07 | |

2. Entity Name: (Fill in a name which uniquely describes this entity.)

Name: **entnam07** (60)

(If only one entity in unit, use unit name)

3. Entity Description:

enttyp07 3a. Type (check one only):

| | | |
|---|---|-----------------|
| 1 <input type="radio"/> Residence, single building | } Total number of individual residences: <input type="text"/> | indres07 |
| 2 <input type="radio"/> Residential community (gated, mobile home park) | | |
| 3 <input type="radio"/> Hotel | 8 <input type="radio"/> Participant recreation | |
| 4 <input type="radio"/> Shopping area | 9 <input type="radio"/> Airport | |
| 5 <input type="radio"/> Community center | 10 <input type="radio"/> Other transit center | |
| 6 <input type="radio"/> Entertainment complex | 11 <input type="radio"/> Office complex | |
| 7 <input type="radio"/> Convention center | 12 <input type="radio"/> Industrial complex | |
| 13 <input type="radio"/> Other: <input type="text"/> | | sptype07 |

3b. Physical Characteristics:

For a single building:

Total # of Occupied Floors in Building:

nfloor07

Total Entity Area: (sq. feet)

flsqft07

or

(sq. meters)

flsqmt07

For a multiple-building entity:

Total # of Occupied Buildings:

numblid07

Total Entity Area: (acres)

blacre07

or

(hectares)

blhect07

Conversions: 43,560 sq. feet = 1 acre
10,000 sq. meters = 1 hectare



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Entity Characteristics

Date Completed:

| | | | | | | | | | |
|---------|--|---|-------|--|---|--------|--|--|--|
| | | / | | | / | | | | |
| (month) | | | (day) | | | (year) | | | |

Entity ID:

| | | | | | | | | |
|--------|--|---|--------|--|--|---|----------------|--|
| | | — | | | | — | | |
| (site) | | | (unit) | | | | (entity) (chk) | |

4. Entity Population:

resyn07 a) Does entity have residential population? (Don't worry about time spent on vacation or away from the residence.)

0 No

1 Yes

$$\begin{array}{c} \text{numres07} \\ \text{\# of residents} \end{array} \times \begin{array}{c} 16 \\ \text{hours} \end{array} \times \begin{array}{c} 350 \\ \text{days} \end{array} \times \begin{array}{c} \text{res5007} \\ \text{fraction } \geq 50 \\ \text{years old} \\ (100\% = 1.00) \end{array} = \begin{array}{c} \text{reshrs07} \\ \text{(a)} \end{array}$$

stfyn07 b) Does entity have staff/workers? (An average of 2 weeks vacation has been incorporated into the formula.)

0 No

1 Yes

$$\begin{array}{c} \text{numstf07} \\ \text{\# of workers/staff} \\ \text{(full time equivalents,} \\ \text{not total staff)} \end{array} \times \begin{array}{c} 8 \\ \text{hours per} \\ \text{work day} \end{array} \times \begin{array}{c} 250 \\ \text{days} \end{array} \times \begin{array}{c} \text{stf5007} \\ \text{fraction } \geq 50 \\ \text{years old} \\ (100\% = 1.00) \end{array} = \begin{array}{c} \text{stfhrs07} \\ \text{(b)} \end{array}$$

visyn07 c) Does entity have variable population (visitors, shoppers, etc.)?

0 No

1 Yes

$$\begin{array}{c} \text{numvis07} \\ \text{\# total visitors per year} \end{array} \times \begin{array}{c} \text{vishrd07} \\ \text{avg. hours spent} \\ \text{there per day} \end{array} \times \begin{array}{c} \text{vis5007} \\ \text{fraction } \geq 50 \\ \text{years old} \\ (100\% = 1.00) \end{array} = \begin{array}{c} \text{vishrs07} \\ \text{(c)} \end{array}$$

Now total the figures in the right column:

$$\text{(a) + (b) + (c) = } \begin{array}{c} \text{tothrs07} \end{array}$$

Estimated Population by Age:

pctyng07 % < 50 yrs old: %

pctmid07 % 50 - 65 yrs old: %

pctold07 % > 65 yrs old: %

Estimated Population by Gender/Race:

pctfem07 % female: %

pctnwh07 % non-white: %

pctblk07 % Black

if available: **pctasn07** % Asian/Pac. Islander

pctnat07 % Native American

pctoth07 % Other



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Entity Characteristics

Date Completed:

| | | | | | | | | | |
|----------------------|----------------------|---|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (month) | | | (day) | | | (year) | | | |

Entity ID:

| | | | | | | | | |
|----------------------|----------------------|---|----------------------|----------------------|----------------------|---|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | — | <input type="text"/> | <input type="text"/> | <input type="text"/> | — | <input type="text"/> | <input type="text"/> |
| (site) | | | (unit) | | | | (entity) | (chk) |

5. Entity EMS and Paramedic Response Time:

| | | | |
|--|----------------------|----------------------|-----------------|
| | minutes | seconds | |
| Estimated tier 1 (non-ALS) response time to curb/parking spot: | <input type="text"/> | <input type="text"/> | tmtir107 |
| Estimated tier 2 (ALS) response time to curb/parking spot: | <input type="text"/> | <input type="text"/> | tmtir207 |
| Estimated time from curb to patient's side: (e.g., to middle of building or housing community) | <input type="text"/> | <input type="text"/> | tmpat07 |

6. Estimated Number of AEDs and Volunteers Needed:

| | | | | |
|--|----------------------|--|-----------------|---------------------------------|
| Estimated number of AEDs needed: | <input type="text"/> | } (Protocol requires < 3 minute time for volunteer to get AED and reach patient's side.) | estaed07 | <u>Typical needs:</u> |
| Estimated number of volunteers needed: | <input type="text"/> | | estvol07 | 2 - 5 AEDs 5 - 15 volunteers |

7. Complete & attach a Preliminary Entity Assessment & Plan form indicating population characteristics, description of volunteers, existing communications system, intervention plan, and data collection plan.

Signature of person filling out this form

code07

| | | | |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Code Number | | | |

For CTC Use Only

| | | | | | | | |
|---|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Yes <input type="radio"/> No | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |