



# *Bristol-Norfolk Medical Reserve Corps, Inc.*

Serving the Communities of  
Attleboro, Foxboro, Mansfield, North Attleboro, Norton, Plainville, Rehoboth, Seekonk

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## Medical Reserve Corps Overview Post Test

**Please circle an answer for each question below:**

1. **True or False:** Credentialed Medical Reserve Corps (MRC) volunteers are able to self deploy to any public safety crisis or public health emergency.
2. **True or False:** MRC volunteers are supplementing staffing needs at a Shelter after a blizzard in a local community. The local cable station comes to the shelter and requests an interview with Mary, the greeter, at the door and an update on the shelter situation. Mary should agree to meet with the reporter from the local cable station and answer a few questions.
3. **True or False:** Volunteers should be aware of their limitations, physical and emotional, and must assume roles that are within their current training.
4. **True or False:** Medical Reserve Corps recruits volunteers to pre-train and pre-credential them before a disaster strikes.
5. **True or False:** The Medical Reserve Corps has no military ties; therefore, accepting deployments requests are strictly voluntary, not mandatory.
6. **True or False:** Dennis is an MRC volunteer, but doesn't have supplies in the basement nor has he spoken to his wife and children in case he is deployed. Dennis feels that everything will be fine if he hasn't spoken to them. Is this thinking correct?
7. **True or False:** Incident Command System 100b (ICS) and National Incident Management System 700a (NIMS) are courses that teach the chain of command to be followed during a crisis.
8. **True or False:** A volunteer needs to sign in at any deployment, however does not need to sign out when going off duty or taking a break
9. **True or False:** There are four (4) stages to an Emergency: Planning, Response, Recovery & Mitigation.
10. **Yes or No:** Joe needs syringes for his vaccine station during an Emergency Dispensing Site Drill and yells out to Jim, the Security Leader, and requests additional syringes. Is this accepted protocol?

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Print)

Once completed, please mail to: Bristol-Norfolk MRC, Attn: Debbie Revelle,  
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