for locating a medical facility) or feature alternatively could be packaged as a standalone item for PDAs and other mobile computing devices or central databases available to concierge-type services.

[0250] The component preferably accepts the current GPS location of the individual in the GPS field **2705** along with the particular required medical specialty **2710**, as illustrated in **FIG. 27**(*a*). In at least one embodiment, the required medical specialty is preferably selected from a dropdown menu **2712**, as illustrated in FIGS. **27**(*a*) and **27**(*b*). After accepting the current GPS location of the individual along with the particular medical specialty required, the component then preferably determines the nearest medical facility (e.g., "GW University Hospital" in medical facility field **2715**) with the specialty and resources to address the health issue, as illustrated in **FIG. 27**(*b*). In at least one embodiment, the component preferably also determines the nearest medical facility of any kind. In at least one embodiment, the component provides geographical directions to the medical facility. The database may include additional contact information such as the doctors who oversee the specialties and information to enable the requestor to reach the particular medical facility, as illustrated in **FIG. 27**(*d*).

[0251] The interfaces shown in FIGS. **27**(*c*) and **27**(*d*) may also be used for adding new medical facilities along with updating/editing information about existing medical facilities in at least one embodiment of the invention.

[0252] In addition to including apparatus and system embodiments, the invention also includes methods for creating and capturing medical information. The above discussion regarding the exemplary embodiments and applications of the invention describe some methods for completing electronic forms, gathering information, transferring information between devices/databases, and accessing data.

[0253] One exemplary method of using the exemplary system includes the initial setup of EICs and PDAs for use in the system, handling health situations and transmitting the medical information with the patient to the medical facility.

[0254] The initializing of EICs was discussed above in detail as part of an exemplary embodiment. The actual method for initializing EICs is shown in **FIG. 28**. In step **2805**, the EIC is formatted to accept information. The formatting can be done using the mobile computing device with an appropriate software interface(s) or other processing device.

[0255] In conjunction with, before, or after the first step, the patient's information is configured in step **2810** as discussed above in connection with patient creation.

[0256] In step **2815**, patient information is downloaded onto the EIC. In step **2820**, the EIC is provided to an individual for future use. Extensions of this method is to also download information gathered as part of pre-deployment processing in a military application (or processing of rescue workers in a civilian terrorist situation) and/or adding a medical history of the individual to the EIC.

[0257] The configuration of the PDAs can be accomplished in a variety of ways including the importing of information for individuals who would be cared for by the medical professional being assigned the PDA to mirror that information contained on the EIC. Alternatively, the PDA could be configured to obtain all of its information on the fly from an EIC and/or over a network. In any event, the configuration should be determined and performed prior to deployment of the PDA.

[0258] **FIG. 29** illustrates a method according to at least one embodiment of the invention for handling medical information from the point of treatment through treatment at a medical facility. The first step (**2905**) is to process the encounter for the medical situation as outlined in more detail in connection with the exemplary embodiments previously discussed. Step **2905** preferably includes receiving patient information on a mobile computing device.

[0259] After receiving the medical information, in step **2910**, it is preferably transferred to a database accessible at a medical facility through a network remotely, an EIC, or a network onsite with the database. Preferably, the transfer in the military environment will occur with the medical information being transferred from the PDA of the medic to the EIC. Upon arrival at the medical facility, a staff person will read information from the EIC and transfer the information to a database accessible at the medical facility by other staff members. In the civilian world, the transfer will preferably occur with transmission of the medical record over a wireless connection from the scene, in transit, or once on the grounds of the medical facility.

[0260] As the patient is treated under either scenario, additional medical information may be accumulated and attached to the patient's medical record in step **2915**. The medical staff may also make use of the system with appropriate forms for entering the additional medical information via mobile computing devices. In the military environment, upon the patient leaving the medical facility, the patient's information is preferably downloaded to the patient's EIC.

[0261] In keeping with a particularly advantageous aspect of the invention, a medical supplies inventory utility is provided in at least one embodiment. **FIG. 30** illustrates exemplary steps executed by the medical supplies inventory utility. Prior to performing the method, an inventory of supplies for the medical professional may be conducted to determine the initial contents of the medical supply inventory.

[0262] For instance, during the prestep **3004**, personnel may manually or automatically conduct initial inventory according to a known inventory procedure. For example, by conducting an initial inventory, it may be determined that a certain number of catheters are present in the inventory.

[0263] A patient (e.g., wounded soldier) may require one of the catheters. Thus, in step **3005**, the number of catheters determined in prestep **3004** is preferably decremented to account for the catheter that will be used for the patient.

[0264] It may have been decided that at all times the medical inventory would include at least 300 medical catheters. As some of the medical catheters are needed for wounded soldiers, for example, the total inventory of medical catheters will be diminished, as illustrated in step **3005**.

[0265] Thus, in decision step **3010**, it is determined whether the number of medical supplies have reached or fallen below a pre-determined threshold. If the total number of a particular type of medical supply has reached or fallen below a pre-determined threshold, an additional number of