**APPENDIX 1**

INCIDENT EMERGENCY PLAN (IEP)

# INTENT

The primary goal of this **Incident Emergency Plan** (**IEP**) is to provide incident personnel the guidelines necessary to ***locate, triage, extricate, treat, and transport*** all accident patients in as quick and safe a manner as possible. The IEP (below) describes the procedures that will be taken, as well as defines the responsibilities of key incident management personnel. This plan employs the 2014 suggested format which is in turn closely linked to the new 2014 ICS-206 (WF) Medical Plan and 2014 IRPG (Incident Response Pocket Guide). All three follow the same procedures. This IEP will guide the actions that should be taken in response to an emergency and fulfills the NWCG requirements (#025-2010) by ensuring that:

1. The critical elements of the NWCG standardized medical emergency procedures are identified in this Incident Emergency Plan.
2. Standardized NWCG communication center protocols will be implemented.
3. An expanded ICS 206 Medical Plan will be utilized which includes emergency medical procedures that will be reviewed each operational period at the planning meeting.

# PLAN

The following IEP will be utilized on all team assignments. It displays procedures and responsibilities for team members.

**Incident Name and Date**

**Incident Management Team Name/Number**

**COMMAND AND GENERAL STAFF INCIDENT EMERGENCY ACTION PLAN AND CHECK LIST**

The primary goal of this **Incident Emergency Plan** (**IEP**) is to provide incident personnel the guidelines necessary to ***locate, triage, extricate, treat, and transport*** all accident patients in as quick and safe a manner as possible. The closest operationally qualified resource (DIVS, TFLD, ENGB, CRWB, etc.) will initially oversee the emergency and activation of the **IEP** as the Incident With in an Incident (IWI) Incident Commander. Radio communication will be on the Command frequency and will take priority over other radio traffic**. Names and crew designators of injured or deceased individuals will not be given over the radio.** Deceased individuals and their equipment are not to be moved, except to accomplish rescue work or to protect the health and safety of others. Local cooperator resource availability (i.e. county sheriff, etc.) should be established early in the assignment and activated as necessary during an IWI. This person may, under local authority, assume command of the IWI.

At the time of a reported incident, the Command and General Staff (C&G) will begin implementation of the IEP. Initially the C&G will assemble at the Communications Unit to communicate, share information, coordinate and begin developing a common operating picture to support the IWI and to provide for continuity of ongoing operations as required.

If a serious injury or serious medical incident occurs at the Incident Command Post call 911 and contact the Medical Unit for assistance.

All Hazard IWI’s will be addressed using this protocol as applicable. Specific information for potential All Hazard Incidents can be found in the attached document, All Hazard Incident Emergency Response Plans.

**Standards for Initial Response to IWI on the Fire**

* The closest operationally qualified resource will become IC of the IWI.
  + Notify EMT and request medical assistance.
  + Contact Communications:
    - Use ICS-206 WF Medical Plan
      * Name and claim the incident.
      * Use the Medical Incident Report section of the Medical Plan for initial notification.
  + Oversee medical emergency response
    - Use the Medical Incident Report found in the ICS-206 WF and the 2014 IRPG (page 108-109) to provide further information to Communications.
  + Transfer command to higher level qualification as needed.
    - If transfer of command occurs announce clearly to Communications and all resources.

**At no time during the incident/fatality or evacuation process will the name of the**

**victim(s), tail number, engine number, or crew name be transmitted.**

Green: Minor, non-life threatening.

Yellow: Potentially life threatening needs transport.

Red: Life threatening.

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| Responsibility Action GREEN YELLOW RED | | | | |
| **Communications Unit** | Upon initial notification the RADO will immediately notify the COML.   * If it is life threatening, clear the designated frequency for emergency traffic. |  | Yes | Yes |
| Use Medical Incident Report in ICS-206 WF, Medical Plan, to gather initial information from IWI IC. |  | Yes | Yes |
| **Communications Unit Leader** | Notify Medical Unit Leader. |  | Yes | Yes |
| Summon all C&G to Communications. |  | Yes | Yes |
| Coordinates with IWI IC as needed. |  | Yes | Yes |
| Coordinates with Operations Section Chief on continuity of operations. |  | Yes | Yes |
| Contact local EMS/Sherriff for assistance if requested. | Yes | Yes | Yes |
| Ensures radio traffic is accurately documented. | Yes | Yes | Yes |
| Prepares narrative package of radio summary for Planning Section (Documentation Unit). |  | Yes | Yes |
| Ensure that agency and local law enforcement entities are notified and implement appropriate security measures for the situation. |  | Yes | Yes |
| Ensure continuity of operation within unit. |  | Yes | Yes |
| **Incident Commander/**  **Deputy Incident Commander**  Primary:  IC name/contact info  Secondary:  Name/contact info as designated by IC | Ensures the Incident Emergency Plan is implemented. |  | Yes | Yes |
| Notifies Agency Administrator and Geographic Coordination Center. Concur on a course of action for follow up. |  | Yes | Yes |
| Maintains command and control, and evaluates the continuity of operations and incident organization needs. |  | Yes | Yes |
| Determines and communicates the C&G roles and responsibilities in relation to jurisdictional responsibilities. |  | Yes | Yes |
| Coordinates Critical Incident Stress Debriefing for affected personnel. |  |  | Yes |
| Provides a Liaison to coordinate with supporting agencies (i.e. Home Unit, Red Cross, chaplain). |  |  | Yes |
| Notifies employee’s home unit if requested by Agency Administrator. |  | Yes | Yes |

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| Responsibility Action GREEN YELLOW RED | | | | |
| **Operations Section**  **(Including on-scene Incident Commander)**  Primary:  Ops Section Chief/Contact info  Secondary:  As identified by Ops Section Chief/ Contact info | Identifies nature of the incident (auto/aircraft accident, burn over, etc) and number of individuals crews, vehicles, or aircrafts involved. |  | Yes | Yes |
| If needed, implements the Incident Emergency Plan, providing coordination between the IWI Incident Commander and other IMT sections and units. |  | Yes | Yes |
| Maintains Continuity of Operations within the Operations Section and organizes appropriately. |  | Yes | Yes |
| Identifies number of people involved and their medical condition (Triage). |  | Yes | Yes |
| Identifies location and (latitude/longitude coordinates) of site. |  | Yes | Yes |
| Ensures immediate medical triage and extrication, treatment, and transportation is implemented. |  | Yes | Yes |
| Coordinates and oversees line EMT& Paramedic response to the accident site (utilize closest EMT’s including those imbedded in crews, engines, etc). | Yes | Yes | Yes |
| Ensures appropriate incident organization to possibly include Triage, Extrication, Treatment and Transportation Units, Medical Group, etc. |  | Yes | Yes |
| Coordinates with Medical Unit Leader for ground ambulance transport, medical supplies and other medical needs. |  | Yes | Yes |
| Coordinates with the Safety Officer, Medical Unit  Leader, and Logistics Section for on scene support and location of receiving hospitals for patients. |  | Yes | Yes |
| Coordinates with Air Tactical Group Supervisor for Air-Medical transportation needs. |  | Yes | Yes |
| Identifies special needs, i.e. Law Enforcement, Heavy Rescue, and Haz Mat response. |  | Yes | Yes |
| Coordinates with and supports the Safety Officer’s investigation and Law Enforcement agencies involved. |  | Yes | Yes |
| Provide periodic update to staff. |  | Yes | Yes |

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| Responsibility Action GREEN YELLOW RED | | | | |
| **Safety Officer**  Primary:  Safety Officer/Contact info  Secondary:  As designated/  Contact info | Coordinates with and supports the IWI IC and Operations Section Chief. |  | Yes | Yes |
| Assists Medical Unit Leader with communications with the hospital and ambulance service. |  | Yes | Yes |
| Initiates the investigation of the incident and recommends the appropriate investigation resources/teams. |  | Yes | Yes |
| Secures witnesses names and initial statements and all evidence relating to the accident. |  | Yes | Yes |
| Obtains sketches and photographs of emergency scene/incident |  | Yes | Yes |
| Coordinates investigation with Compensation/Claims Unit. |  | Yes | Yes |
| Provide periodic update to staff. |  | Yes | Yes |
| Ensure continuity of operation within section. |  | Yes | Yes |
| **Medical Unit Leader**  Primary:  MEDL/Contact info  Secondary:  As designated/  Contact info | Coordinates with IWI IC, local Emergency Communications Center, and hospital. |  | Yes | Yes |
| Ensures TRIAGE of patients using Medical Incident Report. | Yes | Yes | Yes |
| Supports responding EMTs/Paramedics. | Yes | Yes | Yes |
| Ensures documentation of patient conditions and receiving hospitals is coordinated with the finance section. | Yes | Yes | Yes |
| Ensure continuity of operation within unit. | Yes | Yes | Yes |
| **Air Tactical Group Supervisor** | Coordinates aviation resources responding to the incident. | Yes | Yes | Yes |
| Provides communication for incident if needed. | Yes | Yes | Yes |
| Orders relief Air Tactical Group to maintain the continuity of operations if needed. |  | Yes | Yes |
| Maintains continuity of operations within the Air Tactical Group. | Yes | Yes | Yes |
| |  | | --- | | **Logistics Section Chief** |   Primary:  Logistics Section/Contact info  Secondary:  As designated/  Contact info | |  | | --- | | Monitors support functions and assess additional needs. | |  | Yes | Yes |
| |  | | --- | | Provides ground transportation as needed. | |  | Yes | Yes |
| |  | | --- | | Coordinates removal of damaged vehicles or  equipment. | |  | Yes | Yes |
| Coordinates security with Operations Section Chief and Safety Officer as necessary. |  | Yes | Yes |
| Locates and secures personal effects of injured personnel. |  | Yes | Yes |
| Ensure continuity of operation within section. |  | Yes | Yes |
| Provide periodic update to staff. |  | Yes | Yes |
| Responsibility Action GREEN YELLOW RED | | | | |
| **Planning Section Chief**  Primary:  Plans Section/Contact info  Secondary:  As designated/  Contact info | Completes the Wildland Entrapment/Fatality Initial Report (NFES 0869) as needed. |  | Yes | Yes |
| Develops and maintains IEP documentation. |  | Yes | Yes |
| Evaluates and facilitates the implementation of the IEP. |  | Yes | Yes |
| Ensure continuity of operation within section. |  | Yes | Yes |
| Provide periodic update to staff. |  | Yes | Yes |
| **Public Information Officer**  Primary:  Information Officer/Contact info  Secondary:  As designated/  Contact info | Collects pertinent emergency information. |  | Yes | Yes |
| Coordinates information release with Incident Commander and Agency Public Affairs Officer. |  | Yes | Yes |
| Assigns Information Officers to field media inquiries at accident scene, medevac area, and hospital. |  | Yes | Yes |
| Coordinates with Logistics and Safety Officer regarding roadblocks, evacuations and emergency medical information needs. |  | Yes | Yes |
| Withholds release of personal information until approved by Incident Commander and/or Agency Administrator. |  | Yes | Yes |
| Provides briefing at Incident Command Post (ICP) for incident personnel. |  | Yes | Yes |
| Coordinates with on-scene person-in-charge as requested. |  | Yes | Yes |
| Provide periodic update to staff. |  | Yes | Yes |
| Ensure continuity of operation within section. |  | Yes | Yes |
| **Security Manager** | Coordinates with Logistics and Safety to secure scene (as requested). |  | Yes | Yes |
| Ensures continuity of operation within unit. |  | Yes | Yes |
| **Air Operations Branch Director** | Initiates Actions appropriate actions within the “Interagency Aviation Mishap Response Guide and Checklist” if aviation accident. |  | Yes | Yes |
| Maintains continuity of operations within the Air Branch. |  | Yes | Yes |
| **Finance Section Chief**  Primary:  Finance Section/Contact info  Secondary:  As designated/  Contact info | Coordinates Compensation/Claims Unit response. | Yes | Yes | Yes |
| Contacts Incident Business Advisor. | Yes | Yes | Yes |
| Arrange for off-incident support through agency channels . |  | Yes | Yes |
| Secure incident time records. |  | Yes | Yes |
| Assures potential claims information is collected. |  | Yes | Yes |
| Ensure continuity of operation within section. |  | Yes | Yes |
| Provide home unit and emergency contact information to IC. |  | Yes | Yes |
| Provide periodic update to staff. |  | Yes | Yes |

**Medical treatment and evacuation have TOP priority**

**Immediate and clear communication is CRITICAL for response, medical triage, treatment and transportation. If warranted other radio traffic will be restricted to that which involves emergency situations.**

**Personnel not needed at the scene will be relocated or returned to their assigned work; the scene will be secured for possible investigation and witness documentation.**

**Victim(s) name, tail number, crew, engine number, etc. will NOT be transmitted over the radio.**

**No accident related information will be released to the public without the approval of the Incident Commander (Agency Dispatch will notify Agency Emergency Coordinator, Line Officer and Regional Office). For fatalities, Agency Dispatch will contact Sheriff’s Office and the victim’s employer.**

**Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_**

**Incident Name, Incident Commander Date**

**All Hazard Incident Emergency Action Plans**

**Any Medical Situation - Refer to the ICS-206 WF, Medical Plan**

Updated 03/14/2014

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| **Aviation Mishap**   * Contact incident communications and declare nature of emergency, i.e. “Communications -Division A, emergency traffic.” * Assume command and consider assigning tasks. * Request the frequency be cleared. * Describe the nature of mishap. * Identify type of aircraft. * If fire is involved, take appropriate action per training and qualifications. * Injuries - follow **ICS-206 WF, Medical Plan.** * Secure and/or isolate the incident area. * Off Site - maintain contact with communications, give situational updates as needed. * Request additional resources if needed. * If possible, without causing injury to self orothers AND situation dictates (fire is imminent, aircraft is going to move), rescue any victims following medical protocols and level of training. * Reference 2014 Incident Response Pocket Guide “Aircraft Mishap Response Actions” (page 60). * Document all information in unit log. * Resume unrestricted radio traffic when situation is mitigated. |
| **Hazardous Material (Haz Mat)**   * Contact incident communications and declare nature of emergency, i.e. “Communications -Division A, emergency traffic.” * Assume command and consider assigning tasks. * Request the frequency be cleared. * Isolate, secure the area, and **prohibit** entry. * Assess nature of release (i.e. gas, liquid or solid). * Stay upwind/upgrade/upstream. * Provide information as to possible type of material from:   + DOT Placard number for vehicles; and/or   + NFPA 704 (Diamond) Placard for fixed facilities. * Injuries - follow **ICS-206 WF, Medical Plan.** * Reference 2014 Incident Response Pocket Guide “Haz Mat Incident Operations” (pages 34-36). * Document all information in unit log. * Resume unrestricted radio traffic when situation is mitigated. |
| **High/Low Angle Rescue**   * Contact incident communications and declare nature of emergency, i.e. “Communications -Division A, emergency traffic.” * Request the frequency be cleared. * Assume command and consider assigning tasks. * Injuries - follow **ICS-206 WF, Medical Plan.** * Develop a primary plan and consider a contingency (the what if?) (i.e., cannot extricate by ladder, need to use aviation). * Describe details of rescue and request resources and/or equipment needed. * Document all information in unit log. * Resume unrestricted radio traffic when situation is mitigated. |
| **Law Enforcement**   * Contact incident communications and declare nature of emergency, i.e. “Communications - Division A, emergency traffic.” * Assume command and consider assigning tasks. * Request the frequency be cleared. * Nature of the situation. * Injuries - follow **ICS-206 WF, Medical Plan.** * Request any needed assistance. * Protect yourself and others from harm. * Move away from the hazard if possible. * Do not engage subject if possible. * Do not disturb the scene. * Document all information in unit log. * Resume unrestricted radio traffic when situation is mitigated. |
| **Search and Rescue**   * Contact incident communications and declare nature of emergency, i.e. “Communications - Division A, emergency traffic.” * Assume command and consider assigning tasks. * Request the frequency be cleared. * Provide situational specifics (i.e. a crew member fell and is trapped on a ledge; a hiker lost within the incident area). * Injuries - follow **ICS-206 WF, Medical Plan.** * Protect others from being a part of the problem. * Assess possible rescue options based on training, experience, and available equipment. * Reference 2014 Incident Response Pocket Guide “Missing Person Search Urgency” (page 40). * Document all information in unit log. * Resume unrestricted radio traffic when situation is mitigated. |
| **Vehicle Accident (Extrication, Haz Mat, and/or Medical)**   * Contact incident communications and declare nature of emergency, i.e. “Communications -Division A, emergency traffic.” * Assume command and consider assigning tasks. * Request the frequency be cleared. * Declare and describe the “type” of incident (i.e. vehicle accident, number of victims, description of injuries, extrication needed, and/or fuel spill). * Type and number of vehicles involved. * Are these assigned incident resources (equipment/personnel)? * Injuries - follow **ICS-206 WF, Medical Plan.** * Fire and or Haz Mat involved? * Secure the scene. * Reference 2014 Incident Response Pocket Guide “Vehicle Accident Operations” (page 33). * Document all information in unit log. * Resume unrestricted radio traffic when situation is mitigated. |
| **Wildfire Entrapment, Shelter Deployment, and/or Burnover**   * Contact incident communications and declare nature of emergency, i.e. “Communications - Division A, emergency traffic.” * Assume command and consider assigning tasks. * Request the frequency be cleared. * Declare the nature of the emergency.   + Burn over, mass casualty, number of injuries and number of those involved. * Conduct a personnel accountability survey. * Injuries - follow **ICS-206 WF, Medical Plan.** * Size-up situation to include nature of incident, number of injured, patient assessment(s) and location (geographic description and GPS coordinates if possible). * Develop a primary plan and consider a contingency (the what if?). * Request resources and/or equipment. * Secure scene for investigation. * Reference 2014 Incident Response Pocket Guide “Burn Injuries” (page 104) and/or “Multi-Casualty Triage System” (page 106). * Document all information in unit log. * Resume unrestricted radio traffic when situation is mitigated. |
| **Night Emergency Helispot Operations Guidelines**  (Night Vision Goggles NVG)  (Night Vision Systems NVS)   * Identify helispot during day light hours and note hazards.   + Refer to 2014 Incident Response Pocket Guide “Helicopter Landing Area Selection” (page 49).   + Increase the Safety Circle and Touchdown pad specifications. * Identify Helispot Manager. * Ascertain and communicate latitude and longitude (GPS) of helispot. * Confirm direct radio communication with aircraft. * Place and secure a perimeter by hanging or placing glow sticks around a 100’ by 100’ helispot. * **All headlamps/headlights will be turned off** other than the person assigned to marshal in the aircraft. * Do not look at aircraft with headlamps on. * The aircraft marshaler will be positioned to signify wind direction. |
| **Incident Command Post Emergencies**   * Call 911 and Medical Unit Leader for serious injury and/or serious vehicle accident. * Contact incident communications and declare nature of emergency, i.e. “Communications -Plans, emergency traffic.” * Assume command and consider assigning tasks. * Request the frequency be cleared. * Injuries - follow **ICS-206 WF, Medical Plan.** * Document all information in unit log. * Resume unrestricted radio traffic when situation is mitigated. |

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# COMMUNICATIONS PROTOCOL

The IC of the IWI (incident within an incident) should utilize the **Medical Incident Report** (ICS-206 WF) to communicate the critical information. The Communications Unit needs to record that information on a copy of the Medical Incident Report. The Medical Incident Report is contained in both the daily Medical Plan with the IAP and page 108 of the IRPG.

The IWI IC will be single point of contact for the IWI unless he/she delegates that responsibility (Item 2, Incident Commander, in the Medical Incident Report).

# MAPS

IAP and other maps will display all the potential medivac sites. Medivac locations will be displayed on the maps with the common accepted fire symbol for what they actually are, ie, drop point, helispot, sling spot, etc. Helicopter medivac only (ie – only to be used in an emergency, not for crew transport, etc) spots will be identified with the “red cross” symbol. Helispots will be assumed to be medivac capable. Ground locations which also allow for helicopter access will be labeled with the “red cross” symbol in addition to the other symbol.

Division Supervisors or other personnel should provide mapping information to the Situation Unit Leader. Helispots, sling spots, or emergency aerial medivac locations should be approved through Air Operations who will then notify the Situation Unit of approved locations.

# EXPANDED MEDICAL PLAN, ICS 206-WF

The following medical plan should be completed for each operating period. Lines 6 and 7 are used to document the capabilities for medical response and evacuation for each Division, Spike Camps, or other locations away from Base Camp. Divisions or other personnel should preplan for medical response and evacuation and provide that information to the Medical Unit Leader for insertion into the Medical Plan

See next page for ICS 206-WF and instructions.

| 1. **Incident/Project Name** | | | | | | | 1. **Operational Period** | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Click here to enter text. | | | | | | | Date/Time Click here to enter text. | | | | | | | | | | | |
| 1. **Ambulance Services** | | | | | | | | | | | | | | | | | | |
| **Name** | | **Complete Address** | | | | | | | | | | **Phone**  **&**  **EMS Frequency** | | | **Advanced Life Support (ALS)  Yes No** | | | |
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| Click here to enter text. | | Click here to enter text. | | | | | | | | | | Click here to enter text. | | | Click here to enter text. | | | Click here to enter text. |
| 1. **Air Ambulance Services** | | | | | | | | | | | | | | | | | | |
| **Name** | | | | | **Phone** | | | **Type of Aircraft & Capability** | | | | | | | | | | |
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| 1. **Hospitals** | | | | | | | | | | | | | | | | | | |
| **Name**  **Complete Address** | **GPS Datum – WGS 84**  **Coordinate Standard**  **Degrees Decimal Minutes**  **DD° MM.MMM’ N - Lat**  **DD° MM.MMM’ W - Long** | | | | | **Travel Time Air Gnd** | | | | | **Phone** | | | **Helipad**  **Yes No** | | | **Level**  **of Care**  **Facility** | |
| Click here to enter text. | **Lat:** | | | Click here to enter text. | | Click here to enter text. | | | | Click here to enter text. | Click here to enter text. | | |  | |  | Click here to enter text. | |
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| 1. **Division | Branch | Group** | | | **Area Location Capability** | | | | | | | | | |  | | | | | |
| Click here to enter text. | | | **EMS Responders & Capability:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Equipment Available on Scene:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Medical Emergency Channel:** | | | | | | Click here to enter text. | | | | | | | | | |
| **ETA for Ambulance to Scene:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Air:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Ground:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Approved Helispot:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Lat:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Long:** | | | | | | Click here to enter text. | | | | | | | | | |
|  | | | **EMS Responders & Capability:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Equipment Available on Scene:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Medical Emergency Channel:** | | | | | | Click here to enter text. | | | | | | | | | |
| **ETA for Ambulance to Scene:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Air:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Ground:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Approved Helispot:** | | | | | | Click here to enter text. | | | | | | | | | |
| **Lat:** | | | | | | Click here to enter text. | | | | | | | | | |
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| 1. **Name & Location** | **Remote Camp Location(s)** | | |  | |
| --- | --- | --- | --- | --- | --- |
| Click here to enter text. | **Point of Contact:** | | Click here to enter text. | | |
| **EMS Responders & Capability:** | | Click here to enter text. | | |
| **Equipment Available on Scene:** | | Click here to enter text. | | |
| **Medical Emergency Channel:** | | Click here to enter text. | | |
| **ETA for Ambulance to Scene:** | | Click here to enter text. | | |
| **Air:** | | Click here to enter text. | | |
| **Ground:** | | Click here to enter text. | | |
| **Approved Helispot:** | | Click here to enter text. | | |
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| Click here to enter text. | **Point of Contact:** | | Click here to enter text. | | |
| **EMS Responders & Capability:** | | Click here to enter text. | | |
| **Equipment Available on Scene:** | | Click here to enter text. | | |
| **Medical Emergency Channel:** | | Click here to enter text. | | |
| **ETA for Ambulance to Scene:** | | Click here to enter text. | | |
| **Air:** | | Click here to enter text. | | |
| **Ground:** | | Click here to enter text. | | |
| **Approved Helispot:** | | Click here to enter text. | | |
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| **Long:** | | Click here to enter text. | | |
| 1. **Prepared By (Medical Unit Leader)** | | 1. **Date/Time** | 1. **Reviewed By (Safety Officer)** | | 1. **Date/Time** |
| Click here to enter text. | | Click here to enter text. | Click here to enter text. | | Click here to enter text. |

| **Medical Incident Report** | |
| --- | --- |
| **FOR ALL MEDICAL EMERGENCIES: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE** "MEDICAL EMERGENCY" **TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.** | |
| Use items one through nine to communicate situation to communications/dispatch.  **1. CONTACT COMMUNICATIONS/DISPATCH**  *Ex: "Communications, Div. Alpha. Stand-by for Priority Medical Incident Report." (If life threatening request designated frequency be cleared for emergency traffic.)*  **2. INCIDENT STATUS:** *Provide incident summary and command structure.*   |  |  |  | | --- | --- | --- | | **Nature of Injury/Illness** | Click here to enter text. | *Describe the injury*  *(Ex: Broken leg with bleeding)* | | Incident Name | Click here to enter text. | *Geographic Name + "Medical"*  *(Ex: Trout Meadow Medical)* | | Incident Commander | Click here to enter text. | *Name of IC* | | Patient Care | Click here to enter text. | *Name of Care Provider*  *(Ex: EMT Smith)* |   **3. INITIAL PATIENT ASSESSMENT:** *Complete this section for each patient. This is only a brief, initial assessment. Provide additional patient info after completing this 9 Line Report.*   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Number of Patients:Click here to enter text. | Male / FemaleClick here to enter text. | | Age:Click here to enter text. | Weight:Click here to enter text. | | Conscious?  YES **NO = MEDEVAC!** | | | | | | Breathing?  YES  **NO = MEDEVAC!** | | | | | | Mechanism of Injury:  *What caused the injury?* | | Click here to enter text. | | | | Lat/Long (Datum WGS84)  Ex: N 40o 42.45' x W 123o 03.24' | | Click here to enter text. | | |   **4. SEVERITY OF EMERGENCY, TRANSPORT PRIORITY**   |  |  | | --- | --- | | **SEVERITY** | **TRANSPORT PRIORITY** | | **URGENT-RED Life threatening injury or illness.**  *Ex: Unconscious, difficulty breathing, bleeding severely, 2o – 3o burns more than 4 palm sizes, heat stroke, disoriented.* | Ambulance or MEDEVAC helicopter. Evacuation need is **IMMEDIATE.** | | **PRIORITY-YELLOW Serious Injury or illness.**  *Ex: Significant trauma, not able to walk, 2o – 3o burns not more than 1-2 palm sizes*. | Ambulance or consider air transport if at remote location. Evacuation may be **DELAYED.** | | **ROUTINE-GREEN**  Not a life threatening injury or illness.  *Ex: Sprains, strains, minor heat-related illness.* | Non-Emergency. Evacuation considered  **Routine of Convenience.** |   **5. TRANSPORT PLAN:**   |  |  |  |  | | --- | --- | --- | --- | | **Air Transport:** (Agency Aircraft Preferred) Click here to enter text. | | | | | Helispot | Short-haul/Hoist | Life Flight | Other | | **Ground Transport:** Click here to enter text. | | | | | Self-Extract | Carry-Out | Ambulance | Other |   **6. ADDITIONAL RESOURCE/EQUIPMENT NEEDS:**   |  |  |  | | --- | --- | --- | | Paramedic/EMT(s) | Crew(s) | SKED/Backboard/C-Collar | | Burn Sheet(s) | Oxygen | Trauma Bag | | Medication(s) | IV/Fluid(s) | Cardiac Monitor/AED | | Other (i.e. splints, rope rescue, wheeled litter) | | |   **7. COMMUNICATIONS:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Function | Channel Name/Number | Receive (Rx) | Tone/NAC \* | Transmit (Tx) | Tone/NAC \* | | *Ex: Command* | *Forest Rpt, Ch. 2* | *168.3250* | *110.9* | *171.4325* | *110.9* | | COMMAND | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | | AIR-TO-GRND | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | | TACTICAL | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |   \*(NAC for digital radio system)  **8. EVACUATION LOCATION:**   |  |  | | --- | --- | | Lat/Long (Datum WGS84)  *EX: N 40 42.45' x W 123 03.24'* | Click here to enter text. | | Patient's ETA to Evacuation Location: | Click here to enter text. | | Helispot/Extraction Size and Hazards: | Click here to enter text. |   **9. CONTINGENCY:** | |
| ***Considerations: If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead...*** | **REMEMBER: Confirm ETA's of resources ordered** **Act according to your level of training** **Be Alert. Keep Calm. Think Clearly. Act Decisively.** |

