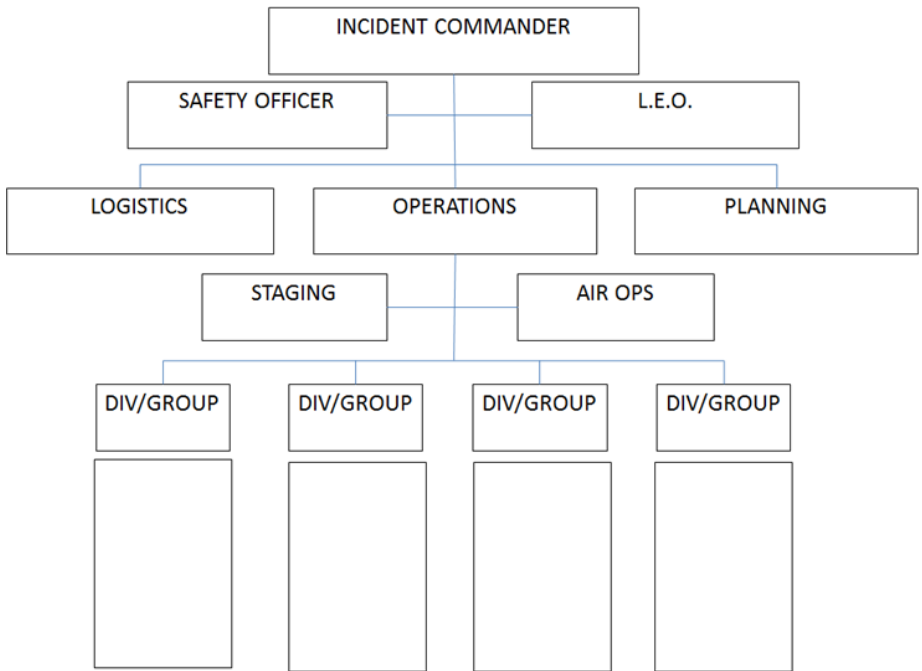


2024 Craig Interagency Dispatch Center Initial Fire Size Up Version 24.1

Fire Name:				IA Number:		
				Fire Code:		
Reported By:						
Descriptive Location:						
Dispatch Date:				Time:		
				IA Time:		
Legal: Township:		Range:		Section(s):		
				Polygon		
In NAD 83 Format (Degrees, Minutes.minutes) at Point of Origin						
Latitude			Longitude		Elevation	
Estimated Size (acres):			Ownership @ Origin:			
Are any Structures Threatened?		No		Yes – specify:		
Does the fire constitute any control problems?		No		Yes – specify:		
Hazard(s):		Beetle Killed timber? 25% 50% 75%<				
Are additional resources needed?		No		Yes – specify:		
Cause (circle one): Lightning Human Unknown						
Fire Investigator:		No		Yes, on order		
				Name:		
IC Name:			Complexity:			
Resource Constraints:						
Command Repeater:			Tactical:		Air/Ground:	
Spread Potential	1) Low		2) Moderate		3) High	
					4) Extreme	
Character of Fire:	1) Smoldering		2) Creeping		3) Running	
	5) Torching		6) Crowning		7) Crown/Spotting	
Weather Conditions:	1) Clear		2) Scattered Clouds		3) Building Cumulus	
	5) Lightning		6) Overcast		7) Intermittent Showers	
Slope:	1) 0 - 25%		2) 26 - 40%		3) 41 - 55%	
					4) 56 - 75%	
Aspect:	1) Flat		2) North		3) NE	
	6) South		7) SW		8) West	
Position on Slope:	1) Ridge top		2) Saddle		3) Upper 1/3 of Slope	
	4) Middle 1/3 of Slope		5) Lower 1/3 of Slope		6) Canyon Bottom	
Fuel Type:	1) Grass		2) Grass/Brush		3) Oak Brush	
	4) Pinion/Juniper		5) Lodgepole Pine		6) Spruce/fir	
	7) Aspen		8) Slash		9) Other (specify):	
Wind :	Direction: _____		Speed: _____ Gusts to: _____			
<p>CALL INTO DISPATCH IMMEDIATELY! (Areas in RED are required for any ordered resources and FireCode.)</p>						



Incident Objectives
1. SAFETY of firefighters and public.
2.
3.
4.
Your goal is to manage the incident and not create another.
(Examples: protect structures, keep fire to east of road, river or ridge)
Initial Response Strategy (circle)
Full Suppression-Perimeter control
Point or Zone Protection-Contain
Monitor/Confine (Resource Benefits Fire or Multiple Management Objectives)

	Type 5	Type 4	Type 3	Type 2	Type 1
Command & General Staff	Not activated	May be activated	Some activated	All filled	All filled & may have assistants/deputies
ICS positions	IC, FFTJ/FFT2	IC, TELD/STLD	IC, DIVS, TFLD	Most filled	Most filled
Number of resources	1 to 5	<6	Up to 200	200-500	500+
Operational period	Usually >1	1 in control phase	Multiple	Moderate resistance to stabilization or mitigation, continue into several days.	High resistance to stabilization or mitigation, continuing into several weeks
Written Incident Action Plan (IAP)	Not required	Not required	For each operational period	For each operational period	For each operational period
Formal Incident Planning Process	Not required	Not required	Initiated & followed	Initiated & followed	Initiated & followed
Logistical Support	None	Minimal	Multiple operational periods	Complete support for 7+ days with established incident base and several ICS facilities	Complete support for 14+ days with established incident base and numerous ICS facilities
Incident managed for resource objectives	Minimal oversight				
Effects to population	Minimal	Limited	Affected	Affected	Regional or state affected
Critical Infrastructure/Key resources	Not adversely affected	Adversely affected with uncomplicated mitigation measures that can be implemented within 1 operational period	Adversely affected with mitigation measures extending into multiple operational periods	Adversely affected or destroyed with mitigation measures extending into multiple operational periods & require moderate level of interaction	Numerous adversely affected or destroyed with mitigation measures extending into multiple days or weeks & require long-term planning and considerable coordination
Governing Officials, stakeholders and political groups	N/A	Little to no interaction	Some level of interaction	Moderate level of interaction	High level of interaction
Demobilization Process	N/A	May be informal	May be informal	Required formal process	Required formal process
Other Assets					DOD or other nontraditional agencies may be involved as well as complex aviation operations

Incident Complexity Analysis (Type 4 or 5; Complete A & B)	
Part A: Firefighter Safety Assessment	Concerns, Mitigations, Notes
1. LCES	
2. Fire Orders and Watch Out Situations	
3. Multiple operational periods have occurred without achieving initial objectives	
4. Incident personnel are overextended mentally and/or physically and are affected by cumulative fatigue.	
5. Communication is ineffective with tactical resources and/or dispatch.	
6. Operations are at the limit of span of control.	
7. Aviation operations are complex and/or aviation oversight is lacking.	
8. Logistical support for the incident is inadequate or difficult.	

Part B: Relative Risk Assessment				
Values				Note/Mitigation
1. Infrastructure/natural/cultural concerns	L	M	H	
2. Proximity and threat of fire to values	L	M	H	
3. Social/economic concerns	L	M	H	
Hazards				Note/Mitigation
1. Fuel conditions	L	M	H	
2. Fire behavior	L	M	H	
3. Potential fire growth	L	M	H	
Probability				Note/Mitigation
1. Time of season	L	M	H	
2. Barriers to fire spread	L	M	H	
3. Seasonal severity	L/ M	H	VH/ E	
<i>Enter the number of items circled for each column.</i>				

Relative Risk Rating (Circle one):

Low: Majority of items are "low", with a few items rated as "moderate" and/or "High".
Moderate: Majority of items are "Moderate" , with a few items rated as "Low" and/or "High".
High: Majority of items are " High" , A few items may be rated as "Low" or "Moderate".

Incident Complexity Analysis (Must be completed for Type 1, 2 & 3)					
Part C: Organization					
Relative Risk Rating (From Part B)					
1. Circle the Relative Risk Rating (from Part B)		L	M	H	Note/Mitigation
Implementation Difficulty					
1. Potential fire duration	N/A	L	M	H	
2. Incident strategies (Course of action)	N/A	L	M	H	
3. Functional concerns	N/A	L	M	H	
Socio/Political Concerns					
1. Objective concerns	N/A	L	M	H	
2. External influences	N/A	L	M	H	
3. Ownership concerns	N/A	L	M	H	
Enter the number of items circled for each column.					

Recommended Organization (circle one):

Type 5: Majority of items rated as "N/A", a few items may be rated in other categories
Type 4: Majority of items rated as "Low", with some items rated as "N/A", and a few items rated as "Moderate" or "High"
Type 3: Majority of items rated as "Moderate", with a few items rated in other categories
Type 2: Majority of items rated as "Moderate", with a few items rated as "High"
Type 1: Majority of items rated as "High", a few items may be rated in other categories

See IRPG Pg 10-11 for Indicators of Incident Complexity. For more detailed information

IC Signature: _____

Printed Name of IC: _____

Date: _____

Spot Weather Observation and Forecast Request

Reason for Spot Request: Wildfire OR Non-Wildfire (Prescribed Fire etc.)	Latitude: Longitude: e:
---	--

Elevation Top: Bottom:	Size (Acres):
Aspect:	Sheltering: Full Partial Unsheltered

Fuel Type/Model: Grass/1-3 Brush/4-7 Timber/8-11 Slash/11-13 Grass/Timber Understory/2,5,8

Weather Observations:

Place	Elev.	Obs Time	Wind: Direction/ Velocity						Sky/ Weather
			20 Foot	Eye Level	Dry Bulb	Wet Bulb	RH	DP	

Forecast Needed: Today Tonight Tomorrow

Location and name of nearest RAWs:

Remarks:

All forecast elements listed below are needed in return forecast!

Date and Time Spot Forecast Received:

SPOT WEATHER	TODAY	TONIGHT	TOMORROW
SKY WEATHER			
TEMP			
HI/LOW			
RH %			
MAX/MIN			
WIND			
SPEED/DIR.			
HAINES			
SMOKE DISPERSAL			
REMARKS			

Spot Weather Observation and Forecast Request

Reason for Spot Request: Wildfire OR Non-Wildfire (Prescribed Fire etc.)	Latitude: Longitude: e:
---	---

Elevation Top: Bottom:	Size (Acres):
-------------------------------	----------------------

Aspect:	Sheltering: Full Partial Unsheltered
----------------	---

Fuel Type/Model: Grass/1-3 Brush/4-7 Timber/8-11 Slash/11-13 Grass/Timber Understory/2,5,8

Weather Observations:

 Place	Elev.	Obs Time	Wind: Direction/ Velocity						Sky/ Weather
			20 Foot	Eye Level	Dry Bulb	Wet Bulb	RH	DP	

Forecast Needed:	Today	Tonight	Tomorrow
-------------------------	--------------	----------------	-----------------

Location and name of nearest RAWs:

Remarks:

All forecast elements listed below are needed in return forecast!

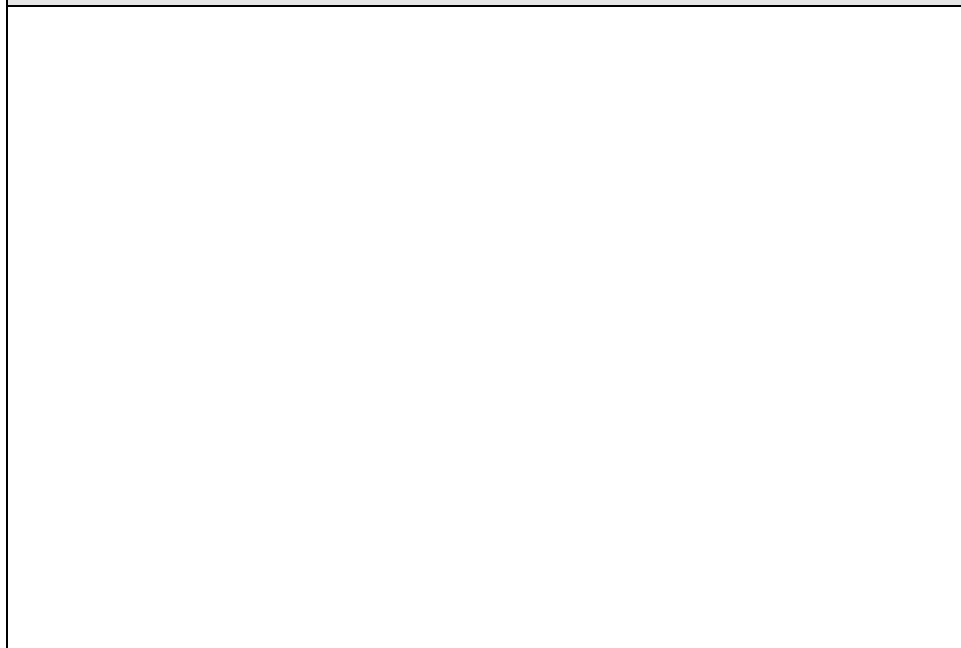
Date and Time Spot Forecast Received:

SPOT WEATHER	TODAY	TONIGHT	TOMORROW
SKY WEATHER			
TEMP			
HI/LOW			
RH %			
MAX/MIN			
WIND			
SPEED/DIR.			
HAINES			
SMOKE DISPERSAL			
REMARKS			

COMMUNICATION PLAN/FREQUENCIES

Net	RX	TX	Tone	Name
Command				
Support				
A/G				
Air-Air				
TAC				
TAC				

MAP SKETCH



Prepared by:

Position:

Date/Time:

Work Rest Ratio Documentation Worksheet

This worksheet is designed to help the IC document and calculate amount of rest required to meet the Work/Rest guidelines.

For every 2 hours of work or travel provide 1 hour of sleep or rest.

- IC must justify and document work shifts exceeding 16 hours and those that do not meet the 2:1 work/rest guidelines -- see below.

Date	Operational Period Start Time	Operational Period Stop Time	Total Hours Worked	Rest Time (document hours when employee or module rested)

Approval for shift lengths exceeding 16 hrs given by:	Date/ Time Approval Given:
---	----------------------------

IC Signature:	Date:
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After Action Review

Incident Name:		IC:
Date:	Incident Complexity:	
Critiqued By: (Names of attendees)		

What was planned?
What actually happened?
What was the difference, if any between questions one and two?
What can be done different next time to meet objectives?

AAR Leader Signature:	Date:
Reviewed By:	Date:

FINAL FIRE REPORT

Cause: (Circle #)	1. Lightning	2. Campfire	3. Smoking		
	4. Debris burning	5. Arson	6. Equipment Use		
	7. Railroad	8. Children	9. Other		
Resource on Scene: (# of	T6 Engines_____	T3 Helicopters_____	Equipment_____		
	T4 Engines_____	T2 Helicopters_____	Water Tenders_____		
	Hand crews_____	Retardant_____	Other_____		
Topography:	1. Ridge top	2. Saddle	3. Upper 1/3		
	4. Middle 1/3	5. Lower 1/3	6. Canyon bottom		
	7. Valley bottom	8. Mesa or plateau	9. Flat or rolling		
Aspect:	1. Flat	2. N	3. NE	4. E	5. SE
	6. S	7. SW	8. W	9. NW	10. Ridgetop
Slope	1. 0-25%	2. 26-40%	3. 41-55%	4. 56-75%	5. 76+%
Elevation	1. 0-500'	2. 501-1500'	3. 1501-2500'	4. 2501-3500'	5. 3501-4500'
	6. 4501-5500'	7. 5501-6500'	8. 6501-7500'	9. 7501-8500'	10. 8500+

ACTUAL CONTAINMENT:

Date_____ Time_____ Acres_____

ACTUAL CONTROL:

Date_____ Time_____ Acres_____

OUT:

Date_____ Time_____ Acres_____

PERFORMANCE EVALUATION DONE FOR OFF UNIT RESOURCES?

SHIFT TICKETS, TIMESHEETS & INSPECTIONS COMPLETED?

MEDICAL PLAN (ICS 206 WF)
Controlled Unclassified Information//Basic

Medical Incident Report	
<p>FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.</p> <p>FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.</p>	
<p align="center">Use the following items to communicate situation to communications/dispatch</p>	
<p>1. CONTACT COMMUNICATIONS/DISPATCH <i>Ex: "Communications, Div. Alpha. Stand-by for Priority Medical Incident Report." (If life threatening request designated frequency be cleared for emergency traffic.)</i></p> <p>2. INCIDENT STATUS: <i>Provide incident summary and command structure. Ex: "Communications, I have a Red priority patient, unconscious, struck by a falling tree. Requesting air ambulance to Forest Road 1 at (Lat./Long.) This will be the Trout Meadow Medical, IC is TFLD Jones. EMT Smith is providing medical care."</i></p>	
<p>Severity of Emergency / Transport Priority</p>	<p><input type="checkbox"/> RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2o – 3o burns more than 4 palm sizes, heat stroke, disoriented</i></p> <p><input type="checkbox"/> YELLOW/ PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary. <i>Ex: Significant trauma, unable to walk, 2o – 3o burns not more than 1-3 palm sizes</i></p> <p><input type="checkbox"/> GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport <i>Not a life threatening injury or illness. Ex: Sprains, strains, minor heat-related illness.</i></p>
Nature of Injury or Illness & Mechanism of Injury	Brief Summary of Injury or Illness
Transport Request	Air Ambulance / Short Haul/Hoist Ground Ambulance / Other
Patient Location	Descriptive Location & Lat. / Long. (WGS84)
Incident Name	Geographic Name + "Medical" (Ex: Trout Meadow Medical)
On-Scene Incident Commander	Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)
Patient Care	Name of Care Provider (Ex: EMT Smith)
<p>3. INITIAL PATIENT ASSESSMENT: <i>Complete this section for each patient as applicable</i></p>	
Patient Assessment See IRPG page 106	
Treatment:	

MEDICAL PLAN (ICS 206 WF) continued

4. TRANSPORT PLAN:

Evacuation Location (if different): (Descriptive Location (drop point, intersection, etc.) or Lat. / Long.) Patient's ETA to Evacuation Location:

Helispot / Extraction Site Size and Hazards:

5. ADDITIONAL RESOURCE/EQUIPMENT NEEDS:

Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication

6. COMMUNICATIONS:

Function	Channel Name/Number	Receive (Rx)	Tone/NAC *	Transmit (Tx)	Tone/NAC *
<i>Ex: Command</i>	<i>Forest Rpt, Ch. 2</i>	<i>168.3250</i>	<i>110.9</i>	<i>171.4325</i>	<i>110.9</i>
COMMAND					
AIR-TO-GRND					
TACTICAL					

7. CONTINGENCY: Considerations: If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead

8. ADDITIONAL INFORMATION: Updates/Changes, etc.

REMEMBER: Confirm ETA's of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively

Controlled Unclassified Information//Basic