

ALBUQUERQUE ZONE INITIAL ATTACK HANDBOOK

2113 Osuna RD NE, Albuquerque, NM 87113
505-346-2660 (24 Hour Number)
nmabc@firenet.gov



Incident Name			
P#/Fire Code			
IC Name			
Date/Time			
Command Freq			
Tactical Freq			
Air To Ground			
Air to Air			
Contained	Time:	Date:	
Controlled	Time:	Date:	
Out	Time:	Date:	
Incident Commander	Type	Time	Date
Signatures			
IC:		Date:	
FMO/AFMO:		Date:	

Incident Operational Protocols

- IC Identified and known by all.
- LCES in place.
- Size up completed and reported.
- Incident Complexity Analysis completed and monitored by IC and DO.
- Briefing Checklist followed. *back cover*
- Personnel Fully Qualified.
- Span of control and resources adequate for assignment.
(Complexity Analysis)
- **Contact DO about Fire/Updates with in 30 mins of official size-up**
- Conditions or assignment change. Re-evaluate Risk Management Process.

Additional Incident Commander

- Trainee positions filled if conditions permit.
- After Action Review completed in a timely manner. (End of Shift Daily)
- Resource evaluations completed
- If in Wilderness use MIST tactics and seek approval for intrusions
If Necessary. Keep track of Wilderness intrusions
- Keep track of the use of Red Lights and Sirens.
- Track supply needs

1. SAFETY of firefighters and public
2.
3.
4.
Your goal is to manage the incident and not create another

ABC Initial Incident Report**Incident Name:** _____

Date: _____ Time: _____ Incident Number: _____ Reported by: _____

SO Fire Number: _____ Dist. & Fire Num.: _____ Phone #: _____

Cause: Lightning Human Job Code/P#: _____ ABZ FREQ: _____

A/G FREQ: _____

 Stat Fire Non-Stat Fire

Estimated Legal: T _____ R _____ Sec _____ 1/4 _____ Lat: _____ Long: _____

Final Legal: T _____ R _____ Sec _____ 1/4 _____ Lat: _____ Long: _____

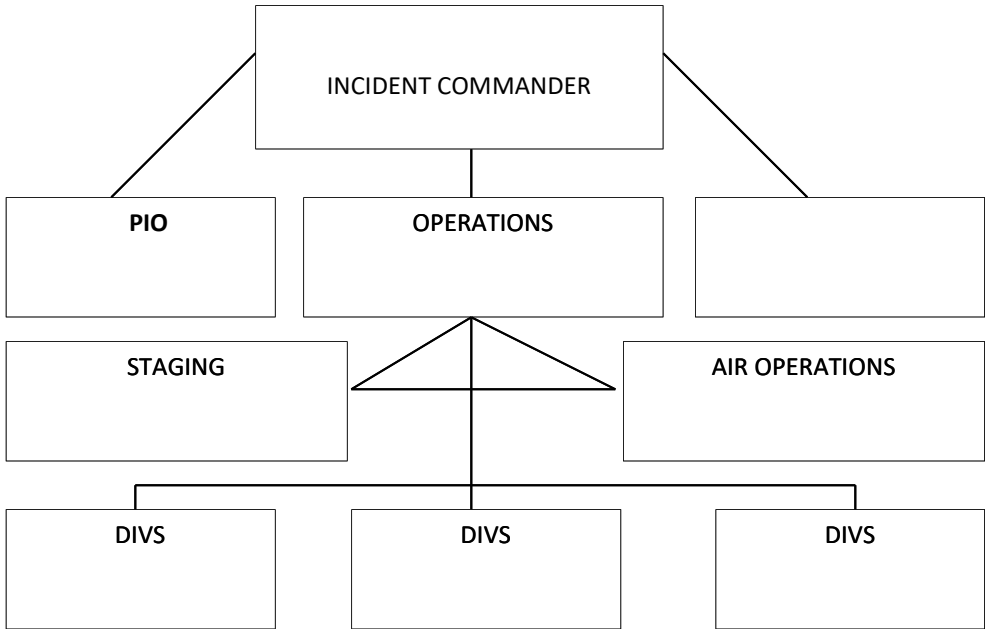
Lookout:		Azimuth:	
Location by Landmark:			
Smoke Description - Volume: <input type="radio"/> Small <input type="radio"/> Medium <input type="radio"/> Large Color: <input type="radio"/> White <input type="radio"/> Gray <input type="radio"/> Blue <input type="radio"/> Black Character: <input type="radio"/> Thin <input type="radio"/> Heavy <input type="radio"/> Billowy <input type="radio"/> Drift <input type="radio"/> Other: Direction from which smoke is drifting:			
Ownership: <input type="radio"/> FS <input type="radio"/> BIA <input type="radio"/> BLM <input type="radio"/> NPS <input type="radio"/> STATE <input type="radio"/> DOD <input type="radio"/> FWS <input type="radio"/> PVT <input type="radio"/> Other: _____ Type of Incident: <input type="radio"/> Wildfire <input type="radio"/> Assist <input type="radio"/> Rx <input type="radio"/> LE <input type="radio"/> Medical <input type="radio"/> SAR <input type="radio"/> Vehicle <input type="radio"/> Other: _____			
Time of Dispatch:		Arrival On scene:	
IC:		Legal:	
Lat:		Long:	
Ownership:		Complexity:	
Directions to fire:			
Est Size:		Fuels Burning:	Adjacent Fuels:
Character of Fire: <input type="radio"/> Smoldering <input type="radio"/> Creeping <input type="radio"/> Running <input type="radio"/> Torching <input type="radio"/> Crowning <input type="radio"/> Spotting			
Flame Length:		Position on Slope: <input type="radio"/> Bottom 1/3 <input type="radio"/> Middle <input type="radio"/> Upper 1/3	Percent Slope
Aspect:		Wind Speed:	Wind Direction:
Spread Potential: <input type="radio"/> None <input type="radio"/> Low 0-5 <input type="radio"/> Moderate 6-10 <input type="radio"/> High 10-50 <input type="radio"/> Very High 50+		Values at Risk: <input type="radio"/> None <input type="radio"/> Houses <input type="radio"/> Improvements <input type="radio"/> Cultural/Historical <input type="radio"/> Other:	
Hazards: <input type="radio"/> None <input type="radio"/> Powerlines <input type="radio"/> Haz-Mat <input type="radio"/> Snags <input type="radio"/> Urban Interface <input type="radio"/> Other:			
Contain Time:		Control Time:	Out Time:
Final Acres:		Out Per:	

Emerging Incident Complexity Analysis (Type 3, 4, 5)

NOT COMPLEX—Proceed with initial attack	YES	NO
Fire Behavior		
Fuels extremely dry and susceptible to long range spotting or you are currently experiencing extreme fire behavior.		
Weather forecast indicating no significant relief or worsening conditions-		
Current or predicted fire behavior dictates indirect control strategy with large amounts of fuel within planned perimeter.		
Firefighter Safety		
Performance of firefighting resources affected by cumulative fatigue.		
Overhead overextended mentally and/or physically.		
Communication ineffective with tactical resources or dispatch.		
Organization		
Operations are at the limit of span of control.		
Incident action plans, briefings, etc. missing or poorly prepared.		
Variety of specialized operations, support personnel or equipment.		
Unable to properly staff air operations. Limited local resources available for initial attack.		
Heavy commitment of local resources to logistical support.		
Existing forces worked 24 hours without success.		
Resources unfamiliar with local conditions and tactics.		
Values to be protected		
Urban interface: structures, developments, recreational facilities, or potential for evacuation.		
Fire burning or threatening more than one jurisdiction and potential for unified command with different or conflicting management objectives.		
Unique natural resources, special-designation areas, critical municipal watershed, T& E species habitat, cultural value sites.		
Sensitive political concerns, media involvement, or controversial fire policy.		

If you have checked ‘Yes’ on more than 3 of the analysis boxes, consider requesting the next level of incident management support.

INCIDENT ORGANIZATION



PERSON	NUMBERS	NET	FREQUENCY
		COMMAND	
		SUPPORT	
		AIR GROUND	
		AIR TO AIR	
		TAC	
		TAC	

Safety Checklist

(If you answer **NO** to any of these questions, take corrective action immediately!)

YES	NO	Do you have a current forecast?
YES	NO	Is observed weather consistent with forecast?
YES	NO	Can you control the fire with the resources available under expected conditions?
YES	NO	Have you developed a plan to attack the fire? (Direct or Indirect, Anchor Points, Escape routes, Priority areas)
YES	NO	Have you communicated your plans to everyone on the incident?
YES	NO	Lookouts in place or can you see the entire fire area?
YES	NO	Can you communicate with everyone on the fire and with dispatch?
YES	NO	Escape routes and safety zones established? If you are using the black, is it completely burned with no re-burn potential?
YES	NO	Safety and standard fire orders being followed?
YES	NO	Have you reported the status of the fire to dispatch?
YES	NO	Will you control the fire before the next operational period?
YES	NO	Do you have a complete list of assigned and ordered resources?
YES	NO	If the fire will not be controlled before the next operational period or the size of the organization exceeds the IC's capability to manage, have you informed dispatch?
YES	NO	Are you still comfortable managing this fire?

Review dimensions and rate according to information currently available.
Consider all risk factors present. Examples are provided as aid, not as check list.
Brief your crew on factors that are Dumb, Dangerous or Different.
Use your best judgment to determine the risk anticipated.

Fire Environment	Low	Moderate	High
ERC	0-42	43-52	53-76
P of Ig	<60	60-80	>80
Temperature	<70	70-90	>90
RH	>60	20-60	<20
Flame Length	<2	2-4	4+
Haines Index	<4	5	6
Ignition(Asspect, w ind,slope)	1 of 3	2 of 3	3 of 3
Overall Rating			

Physical Environment

Slope	0-30	30-60	>60
Weather	No Thunderstorm Activity	Out flow wind potential	Thunderstorms Present
Structures/improvements	No work needed	some work needed	Extensive work needed
Accessibility	Two ways in/out	One way in/out- turn around	One way in/out-no turn around
Overall Rating			

Crew Capabilities

Leadership	Capt. + Asst.	Capt. or Asst.	Fill-in Leader
Experience	Well Seasoned Crew	Fully Qualified Crew	Trainees Present
Familiarity	Same Engine/Crew	Different Engine Assignments	Pick-up Crew
Fatigue	Well Rested	Multiple Shifts	Extended Shifts
Overall Rating			

Resources

Mix	Single Agency	Two Agencies	Multiple Agencies
Aviation	None	Single Aircraft	Multiple Aircraft
Communications	All common		Split Frequencies
Resource Availability	Fully Staffed Locally	Non-local	None
Span of control	1-3	4-5	5+
Overall Rating			

Tactics

Method of Attack	Direct	Parallel	Indirect
Ignition Operations		Burn Out	Back fire
Time of Day	Morning	Afternoon	Night
Overall Rating			

Total Risk Rating	Brief Mitigations Engage	Brief Mitigations Engage	Duty Officer Concurrence Require
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Entrapment Avoidance

Mitigation of Fire Orders and/or Situations that Shout Watch-Out is required

Fire exceeds 100 acres or it is difficult to observe fire behavior

Environmental conditions are above the 90th percentiles

Escape route is the fire line

Suppression actions becoming less effective

Other resources have turned down assignment

Reinforcements have been ordered

Current line is not anchored

There is not an alternate escape route

Spot Weather Forecast Received

Discussion:

A.M.

Sky/Weather:		Chance of <u>Precip:</u>	
Max Temp		Min Rh	
20 ft Winds		Direction	
LAL		Mixing Hight	
Transport Winds		Haines Index	
Vent Rate		Vent Index	

P.M.

Sky/Weather:		Chance of <u>Precip:</u>	
Min Temp		Max Rh	
20 ft Winds		Direction	
LAL		Mixing Hight	
Transport Winds		Haines Index	
Vent Rate		Vent Index	

Wilderness Motorized Equipment Use Authorization Record

Date of Request: __ / __ / __ Wilderness Name: _____

Authorized Time Span: Start Date: _____ Ending Date: _____

Type of Authorization:

Emergency, Fire _____

Emergency, Search and Rescue _____

Administrative _____ (Minimum Tool Analysis Required Attach a copy)

Equipment Authorized	Number of Units	Number of Days	Unit
Helicopter			Landing
Helicopter			Sling Loads
Helicopter			Water Drops
Helicopter			Repellers
Chainsaws			Saws
Air Tankers			Retardant Drops
Air Tankers			Water Drops
Fixed Wing Aircraft			Smoke Jumpers
Fixed Wing Aircraft			Cargo Drops
Portable Pumps			Pumps
Other			
Other			

Authorization: Approved _____ Disapproved _____

Brief Explanation of Approval or Disapproval:

TIME	MAJOR EVENTS

MEDICAL PLAN ICS 206

1. Incident Name: Sandia Reponse COVID-19		2. Operation Period: Date/ Time From: Date/Time To:		
3. Screening & Testing Facilities				
Name	Location	Contact Number	Drive-up	
UNMH Respiratory Care Center	2211 Lomas Blvd, NE Albuquerque, NM 87106	505-272-2411	No	
Additional Instructions: Walk- In 24/7 , In Barbra and Bill Richardson Pavilion, Directions to the RCC at entrance.				
Next Care- Unser Location	1800 Unser Blvd NW Ste 500 Albq, NM 87120	505-205-1271	Yes	
Additional Instructions: Mon- Fri 0800-2000 Sat &Sun 0600-1600 Walk in Clinic & Drive up https://nextcare.com/curbside				
OPTIUM- Journal Center	5150 Journal Center Blvd SE, Albq NM 87109	505-232-1010	Yes	
Additional Instructions: Mon- Fri Sat & Sun 0700-1700				
Next Care- Petroglyph Location	8201 Golf Course Rd NW Ste A3, Albq, NM 87120	505-800-7077	Yes	
Additional Instructions: Mon-Fri 0800-2000 Sat &Sun 0900-1600 Walk in Clinic & Drive up https://nextcare.com/curbside				
4. Transportation Ground Only				
Ambulance Service	Location	Contact Number	Level	
Bernalillo County FD Station 41	10838 HWY 337, Tijeras, NM 87059	911	ALS	
Bernalillo County FD Station 46	25 Frost Rd, Sandia Park, NM 87047	911	ALS	
Bernalillo County FD Station 40	48 Public School Rd, Tijeras NM 87059	911	ALS	
5. Hospitals				
Name Address Phone#	Coordinate GPS DD°MM.MMM N DD°MM.MMM W	Phone Travel Air/ Gnd	Helipad	Level of Care
Presbyterian Hospital 1100 Central Ave SE, Albq 87106 505-841-1642	35°04.920 N -106°38.047 W	Air-15min Grd- 1H	Yes	Trama Center
UNM Hospital 2211 Lomas Blvd NE, Albq 87106 ER 505-2722411	35°05.277 N -106°37.125 W	Air-15min Grd- 1H	Yes	Trama Center Burn Center <30%
Timothy J.Harnar Burn Center 602 Indiana Ave Lubbock TX 79415 1 800-755-8444	33°35.324 N -101°53.633 W	Air-3.5 Rotor 1hr Fixed Grd- 5.5 hr	Yes	Level 1 Burn Center

Medical Emergency Channel: VMED 28 155.340 TX 155.340 RX Tone 156.7

6. Special Medical Emergency Instructions: (COVID-19)- Personel should self screen daily. If suspected to have symptoms of COVID-19, take precautions not to spread virus, inform supervisor, quarantine from other personel and dawn face covering if available. Contact tracing should be considered.

7. Prepared by Name:

Signature:

8. Approved by Name:

Signature:

			Date/ Time:
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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 style="text-align: center;">Use the following items to communicate situation to communications / dispatch.</p> <p>1. CONTACT COMMUNICATIONS / DISPATCH (Verify correct frequency prior to starting report) <i>Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."</i></p> <p>2. INCIDENT STATUS: <i>Provide incident summary (including number of patients) and command structure.</i> <i>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, 2nd - 3rd 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, 2nd - 3rd 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>Ex: Sprains, strains, minor heat-related illness.</i></p>
<p>Nature of Injury or Illness & Mechanism of Injury</p>	<p>Brief Summary of Injury or Illness <i>(Ex: Unconscious, Struck by Falling Tree)</i></p>
<p>Transport Request</p>	<p>Air Ambulance / Short Haul/Hoist Ground Ambulance / Other</p>
<p>Patient Location</p>	<p>Descriptive Location & Lat. / Long. (WGS84)</p>
<p>Incident Name</p>	<p>Geographic Name + "Medical" <i>(Ex: Trout Meadow Medical)</i></p>
<p>On-Scene Incident Commander</p>	<p>Name of on-scene IC of incident within an Incident <i>(Ex: TFLD Jones)</i></p>
<p>Patient Care</p>	<p>Name of Care Provider <i>(Ex: EMT Smith)</i></p>
<p>3. INITIAL PATIENT ASSESSMENT: Complete this section for each patient as applicable (start with the most severe patient)</p>	

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Patient Assessment: See IRPG page 106

Treatment:

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 RESOURCES / EQUIPMENT NEEDS:

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

6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable

Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *
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.

ADDITIONAL INFORMATION FOR FIRE INFORM

FIRE NAME _____ INC#---- _____ P# _____

SO# _____ DIST# _____

POINT OF ORIGIN: TOWNSHIP _____ RANGE _____ SECTION _____

1/4 SEC. _____

LATITUDE _____ LONGITUDE _____

FIRE STARTED ON: FEDERAL LAND STATE LAND / PRIVATE

OTHER Acres: _____

DATE /TIME OF ORIGIN: _____

DATE/TIME OF DISCOVERY: _____

DETECTION METHOD: LOOKOUT PATROL PUBLIC
AERIAL OBSERVER GENERAL AVIATION
INFRARED DETECTION OTHER: _____

STATISTICAL CAUSE: LIGHTNING EQUIPMENT
SMOKING CAMPFIRE RAILROAD
DEBRIS BURNING ARSON MISC

ESCAPE FIRE: YES NO

DATE/TIME OF INITIAL ACTION: _____

DATE/TIME OF CONTAIN: _____

CONTROL: _____

DATE/TIME FIRE DECLARED OUT: _____

FORCES USED TO CONTROL FIRE: (List total numbers used, 1 engine crew =3 FF)

JUMPERS _____ HELITACK _____

ENGINE CREWS _____ FIRE FIGHTERS _____

TYPE 1 HAND CREWS _____ TYPE 2 HAND CREWS _____

EQUIPMENT USED TO CONTROL FIRE: (List total numbers used, count tankers on load and return)

AIR TANKERS

HELICOPTERS

FED ENGINES

COOPERATORS

TENDERS

DOZERS

VLAT _____

TYPE 1 _____

SEAT _____

TYPE 3 _____

TYPE 2 _____

TYPE 1 _____

TYPE 6 _____

TYPE 3 _____

SLOPE: _____ **ASPECT:** _____ **ELEVATION:** _____

FLAME LENGTH: _____

NFDRS FUEL MODEL:

V: GRASS

W: GRASS/SHRUB

X: BRUSH

Y: TIMBER

Z: SLASH

COVER TYPE: DOUGLAS FIR LARCH/DOUGLAS FIR GRAND FIR/LARCH/DOUGLAS FIR

PONDEROSA LODGE POLE PONDEROSA/LARCH/DOUGLAS FIRE

WESTERN WHITE PINE SPRUCE CEDAR/HEMLOCK SUBALPINE DECIDUOUS

BRUSH GRASS/WEEDS GRASS/SAGE

SIZE DESCRIPTION: SEEDLING/SAPLING

POLE TIMBER

MATURE (uncut)

CUT OVER (slash disposal complete)

THINNING SLASH

CUT OVER (slash disposal incomplete)

After Action Review

DATE:

<i>Fire Name</i> Fire Number	Incident Commander	<i>Duty</i> <i>Officer</i>	<i>Fire Cause</i>

FIRE OVERVIEW:

Personnel / Equipment assigned:

Objectives and Action Plan:

Effective and Non-effective Performance:

- **Effective:**

- **Non-Effective:**

Problems / Barriers that were encountered and how they were handled (Non Standard Operating Procedures, Ineffective or Unsafe actions, WHAT not WHO):

Determine Lessons Learned and how to apply them in the future:

FTEM Report

Treatment Name, IF unknown contact ecologist.	
Treatment ID:	
Treatment and Wildfire Interaction Details? Circle one	Wildfire Started in treatment area Wildfire spotted in treatment area Wildfire burned through all acres treated Wildfire burned through some of treatment Treatment used for suppression actions Other:
Treatment Acres Burned by Wildfire	
Date/Time Wildfire Entered Treatment:	
Did the Fire Behavior Change as a result of the treatment?	Yes No The fire did not enter the treatment
Did the treatment contribute to Control and/or management of fire?	Yes No
Was the treatment strategically Located in order to facilitate control of fire?	Yes No
Comments:	

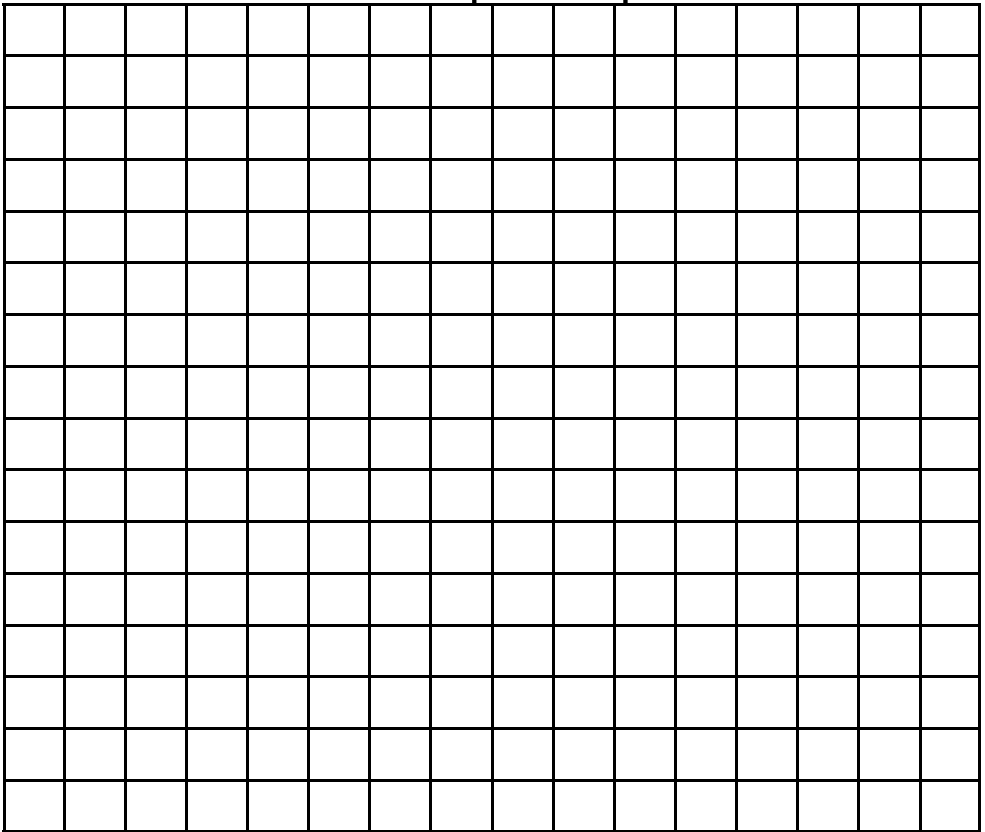
FTEM Report

<p>How did the treatment contribute to the control of the fire? Check all that apply</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Able to do direct attack <input type="checkbox"/> Used Treatment for burnout operations <input type="checkbox"/> Fire Spread was arrested in the treatment <input type="checkbox"/> Fire Spread was slowed in treatment (R.O.S.) <input type="checkbox"/> Other—Details: 												
<p>FL inside treatment? Circle one range</p>	<p>0-2ft 1-4ft 1-6ft 1-8ft 1-12ft 12ft and over</p>												
<p>FL outside treatment? Circle on range</p>	<p>0-2ft 1-4ft 1-6ft 1-8ft 1-12ft 12ft and over</p>												
<p>Inside Fuel Model</p> <table border="1" data-bbox="90 587 518 727"> <tr> <td style="text-align: center;">Model 1</td> <td></td> </tr> <tr> <td style="text-align: center;">Model 2</td> <td></td> </tr> <tr> <td style="text-align: center;">Model 3</td> <td></td> </tr> </table>	Model 1		Model 2		Model 3		<p>Inside Percentage of Fuel Model</p> <table border="1" data-bbox="568 587 1011 727"> <tr> <td style="text-align: center;">Model 1%</td> <td></td> </tr> <tr> <td style="text-align: center;">Model 2%</td> <td></td> </tr> <tr> <td style="text-align: center;">Model 3%</td> <td></td> </tr> </table>	Model 1%		Model 2%		Model 3%	
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Model 2													
Model 3													
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Model 2%													
Model 3%													
<p>Dominate Fire Spread Inside (check all that apply)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Active Crown Fire <input type="checkbox"/> Passive Crown Fire (include group torching) <input type="checkbox"/> Surface Fire <input type="checkbox"/> Other—Details: 	<p>Dominate Fire Spread Outside (check all that apply)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Active Crown Fire <input type="checkbox"/> Passive Crown Fire (include group torching) <input type="checkbox"/> Surface Fire <input type="checkbox"/> Other—Details: 												

FTEM Report

Weather Conditions when Fire entered Treatment:	
Wind Speed	
Wind Direction	
Temp	
RH	
ERC	
Obs Source	
Notes	
Fuel Moistures:	
Measures/Estimated	
Sample Type	
1 hr	
10 hr	
100 hr	
1000 hr	
Live	
Treatment Acres Burned by Wildfire	
Date/Time Wildfire Entered Treatment:	

Attach Map if Required



Perimeter in chains

17ch = 1ac, 24 = 2, 34 = 4, 38 = 5

45 = 7, 53 = 10, 65 = 15

Staging ICP or Camp

Is located: Is located:

NOTES:

(note roads, creeks, trails, etc.)

SECTION OF MAP: (1 MILE BY 1 MILE)

TWN: _____ RANG: _____ SEC: _____

LAT: _____ LONG: _____

Sandia Ranger District Personnel

Name	Position	Work Cell
Crystal Powell	District Ranger	(505) 225-4062
DuWaynes	LEO	(505) 377-0648
Ellissa Martinez	LEO	505-219-5891
Lisa Dennission	Support Service Staff	(505) 281-3304 x5105
Amanda Rael	Wildlife Biologist	(505) 690-4850
Sandia Fire		
Brad Tausan (Detailed)	FMO/ DIV35	(505) 690-6173
Beau Jarvis (Detailed)	AFMO/BAT35	(575) 808-7903
Brent Baca	Fuels AFMO/Fuels 35	(505) 506-1967
Benny Mendoza	Cpt 651	(505) 259-6116
Kyle Kollo	Cpt 652	(850) 377-3563
John Kinder (Detailed)	Sandia Helitack Supt	(812) 320-3000
Kevin Wallner	Sandia Helitack Asst	(406)212-0186
Leslie Pratt	Prevention Patrol 35	(970) 381-9027
Albuquerque Dispatch		(505) 346-2660
OTHER		
Location	Phone Number	
Bernalillo County Fire+Police Dispatch	(505) 798-7000	
Bernalillo County Sheriff (Headquarters)	(505) 468-7100	
Sandoval County Sheriff	(505) 867-7570	
Torrance County Sheriff	(505) 544-4900	
Santa Fe County Sheriff	(505) 986-2400	

ABC Misc. **P3EKV2 (0303)**

Cibola Support **P3EK4W (0303)**

Dry run

Red Flag Warning Days

ABC size fires

Haines 6

Extended Attack <300

Lightning + 2-3 days afterward

Sandia District Group 5

Channel	RX	Tone	TX	Tone	Description
1	170.525		170.525	136.5	Cedro Admin
2	170.525		165.0750	114.8	Cedro Repeater
3	170.525		165.0750	136.5	Dome Repeater
4	170.525		165.0750	103.5	La Mosca Repeater
5	170.525		165.0750	146.2	Albuquerque Repeater
6	170.525		165.0750	107.2	Capilla Repeater
7	170.525		165.0750	131.8	Gallinas Repeater
8	165.750		172.225	136.5	Project 1 RPT
9	172.225		172.225	000.0	Project 2 (car to car)
10	168.6750		168.6750	000.0	TAC-2
11	168.7750		168.7750	000.0	TAC - 3
12	168.350		168.350	000.0	Travel
13	168.4875		168.4875	000.0	A / G 53
14	155.3400		155.3400	156.7	VMED 28
15	154.310		154.310	000.0	State Fire
16	168.625		168.625	110.9	GUARD

IA Group 9 See Tone list

Channel	RX	Tone	TX	Tone	Description	TONE-CG
1	170.525		165.075	103.5	Cibola Repeater / La Mosca Rpt	
2	170.525		170.525	107.2	Cedro Admn / Capilla Rpt	
3	172.225		172.225	110.9	Project 2/ Notches Blk Kettle Rpt	
4	172.675		172.675	114.8	BIA SPA / Cedro Rpt	
5	159.225		159.225	123.0	State Forestry/ Lookout Rpt	
6	154.310		154.310	131.8	State Fire / Gaillenas Rpt	
7	172.500		169.775	192.8	BLM RPT /	
8	169.650		169.650	192.8	BLM Socorro	
9	167.5500		167.5500	136.5	TAC - 1 / Dome Rpt	
10	168.6750		168.6750	141.3	TAC - 2 / South Baldy Rpt	
11	168.7750		168.7750	146.2	TAC - 3 / Mills Canyon Rpt	
12	168.350		168.350	156.7	Travel / Mcgaffey Rpt	
13	168.4875		168.4875	167.9	A / G 53 / Serirra Grande Rpt	
14	155.340		154.340	156.7	V MED 28	
15	168.0125		168.0125	203.5	A / G 18 / Sugarloaf Rpt	
16	168.625		168.625	110.9	GUARD	

TONE LIST

CH	Tone	Description
1	103.5	La Mosca Repeater
2	107.2	Capilla Repeater
3	110.9	Notches Repeater/Black Kettle Repeater
4	114.8	Cedro Repeater
5	123.0	Lookout Mountain Repeater
6	131.8	Gallinas Repeater
7	192.8	BLM RPT
8	192.8	BLM Socorro
9	136.5	Dome Repeater
10	141.3	South Baldy Repeater
11	146.2	Albq Repeater/Mills Canyon Repeater (local only)
12	156.7	Magaffy Repeater
13	167.9	Luera Repeater / Sierra Grande Repeater
14	156.7	V MED 28
15	203.5	Sugarloaf Repeater
16	110.9	Gaurd

Logistics Help Page

Things to keep in mind

- Place supply orders to dispatch by 1000 hrs to receive orders later that operational period
- Place supply orders by 1600 hrs to receive order the next operational shift.
- When ordering pump kit, consider ordering two just in case there is a problem with one
- Hot meals, dinners for that shift must be ordered by 1000 hrs, meals for the next shift must be ordered by 1600 hrs.
- Will you need a fuel truck?
- When selecting a base camp/ staging area, consider using private land as last option. If that is the only option, have a land use agreement in place before occupancy.
- Is base camp sufficient for the incoming resources and logistical support?
- What do the resources need? Special type of equipment to consider?

One Day Order Sheet

Item	Number of units needing item	Conversion factor	Order amount
MRE's	/people	Divide by 3	Cases
Water	/people	Divide by 5	5 gal cubies
AA Batteries	/radio	Divide by 2	Boxes
Breakfasts	/people	Add 2 to total	Breakfast
Lunches	/people	Add 2 to total	Lunches
Dinners	/people	Add 2 to total	Dinners
Porta-Potties	/people	Divide by 10	Porta- potties
Hand washing sta-	/porta-potties	Divide by 2	Hand wash stations
Gatorade	/people	Divide by 12	Cases
Unleaded Fuel	/saw running hrs	Divide by 4	Gallons
Bar Oil	/gals unleaded	Divide by 2	Gallons
2 Cycle Mix	/gals unleaded	Multiply by 2.6 for	ounces

BRIEFING CHECKLIST

Situation

- Fire name, location, map orientation, other incidents in area
- Terrain influences
- Fuel type and conditions
- Fire weather (previous, current, and expected)
- Winds, RH, temperature, etc.
- Fire behavior (previous, current, and expected)
Time of day, alignment of slope and wind, etc.

Mission/ Execution

- Command
Incident commander/ immediate supervisor
- Leaders intent
Overall objectives/ strategy
- Specific tactical assignments
- Contingency plans
- Medevac plan
Personnel, equipment, transport options, contingency plans

Communications

- Communication plan
Tactical , command, air-to –ground frequencies
Cell phone numbers

Service/ Support

- Other resources
Working adjacent and those available to order
Aviation operations
- Logistics
Transportation
Supplies and equipment

Risk Management

- Identify know hazards and risks
- Identify control measures to mitigate hazards/ reduce risk
- Identify trigger points for reevaluating operations

Questions or Concerns?