

IAP- Fire #199

Date: 7/26/25

OBJECTIVES: Lush Fire

- 1. Provide for firefighter and public safety.
- 2. Provide point protection of values at risk.
- 3. Keep fire north of the Yukon River.

BLM fire number	AK-TAD-000199
BLM accounting code	199- S33B
FS code	PDS33B (1532)

RESOURCES & ASSIGNMENTS:

RO #	Resource	LWD	Location	Assignment
C-17	Division A CRW1 Chena IHC (18)	8/2	DIV A #3 allotment	Point/structure protection
	DIV Z Unstaffed			
O-74	DIVS Art Hatfield	7/30	ICP/Yukon River	Shuttle personnel/equipment
E-9	TBOT Doug Green		Yukon River	Shuttle personnel/equipment
E-11	TBOT Janet Woods		Yukon River	Shuttle personnel/equipment
E-16	TBOT Ken Newman		Yukon River	Shuttle personnel/equipment
E-15	TBOT Natalie Newman		Yukon River	Shuttle personnel/equipment
O-75	EMPF Tony Meiklejohn	8/1	ICP	DIV A/Z Paramedic

IMT ORGANIZATION:

Position	Name	Phone #	Position	Name	Phone #
ICT3	O-64 Ken Homik	208-610-5958	Logs	O-86 Craig Cochran	317-446-2252
ICT3(t)	O-88 Tim Hatfield	907-378-4631	SUPL (t)	O-85 Ian Johnson	
OSC3	O-87 Terry Lim	530-414-1490			
HMGB	O-77 Spencer Herda	719-500-9249			
AFUL	O-80 Stacie Oaks		PIO	Beth Ispen	907-356-5511
MEDL	O-82 Trina Mccandless	907-305-0979	TAD	Tasha Shields- DO	907-356-5559
FSC3	O-54 Torie Koller			David Bloemker-FMO	907-356-5569
PTRC	O-81 Mariah Gibson	719-659-3425		Travis McCabe-DO	907-356-5561
			Yukon Dispatch		907-356-5555
PTRC	O-78 Allison Lawrence		Yukon Expanded	Marley	907-356-5817
PSC3(t)	O-89 Noelle Zimm	406-544-9735			

Tail # and Type	RO #	Manager	Phone #	Assignment
9AE T3 ASB3	A-3/A-3.2	Jordan McCabe	520-904-5670	Recon, cargo, medical
920 T2 Bell212	A-36/A-36.1	Connie Stickle	503-348-4581	Buckets, cargo
	O-76	Kyle Weatherbie	HECM	Cargo, Helispots
	O-79	Colin Varek	HECM (t)	Cargo, Helispots

COMMUNICATION: "Controlled Unclassified Information//Basic"

Channel	Rx	Tone	Tx	Tone	Victor
CMD 1 - 199 Command	170.3875		163.0375		Air to Air Primary 126.1250
TAC 1 - Div A Tac	168.0500		168.0500		Rampart Airport 122.9
TAC 2 - Beat Tac	168.2000		168.2000		IA Air to Air 128.45
TAC 4 - Div Z Tac	166.7250		166.7250		
A/G PRI	166.6125		166.6125		TER
GRAY	169.3625		169.3625		
Yukon Dispatch					
AIRGUARD	168.6250		168.6250	110.9	
DECK	163.1000		163.1000		

COORDINATES:

Descriptor	Location	Lat	Long
ICP	Rampart Airstrip	65 30.642 N	150 09.033 W
H-1 (Type 2)	Allotment Cluster 1	65 30.033 N	150 24.157 W
H-2 (Type 2)	Allotment Cluster 2	65 29.625 N	150 16.050 W
H-25 (Type 2)	Allotment Cluster 2	65 29.630 N	150 18.307 W
H-3 (Type 2)	Allotment Cluster 3	65 30.263 N	150 12.065 W
H-4 (Type 2)	Allotment Cluster 4	65 30.870 N	150 13.410 W
H-41 (Type 2)	Allotment Cluster 4	65 30.962 N	150 12.632 W
H-35 (Type 2)	Allotment Cluster 3	65 29.818 N	150 13.797 W
H-38 (Type 2)	Allotment Cluster 3	65 30.267 N	150 13.597 W
H-5 (Type 2)	Allotment Cluster 5	65 31.353 N	150 09.813 W
H-51 (Type 2)	Allotment Cluster 5	65 31.343 N	150 09.270 W
H-52 (Type 2)	Allotment Cluster 5	65 31.585 N	150 10.103 W
H-53 (Type 2)	Allotment Cluster 5	65 31.142 N	150 10.510 W
H-70 (Type 2)	Allotment Cluster 7	65 33.210 N	150 10.340 W
H-8 (Type 3)	Allotment Cluster 8	65 34.828 N	150 10.913 W
H-87 (Type 2)	Allotment Cluster 9	65 37.065 N	150 11.675 W
H-90 (Type 2)	Allotment Cluster 9	65 37.282 N	150 10.600 W

**Medical:** For medical emergencies refer to the ICS 206 Medical Plan and the Medical Incident Report in the IAP (also on pg 120 of the IRRPG). First on scene needs to initiate additional resources by getting Medical Incident Report started over Command 1.

**Safety:** Be Bear aware. Stay alert and look for bear activity. Travel in pairs and make noise. If encountering a bear remain calm and back away slowly. Report all bear issues and sightings and make them known immediately.

**Notes:** Call in orders to operations by 1300 for next day delivery. Send in all CTR's and shift tickets by boat. Or email to [2025.lush.finance@firenet.gov](mailto:2025.lush.finance@firenet.gov)  
Digital filing for CTR's should follow this format: CTR\_RO\_YYMMDD-DD  
EX: CTR\_O21\_250715-18

AIR OPERATIONS:



## MEDICAL PLAN (ICS 206)

<b>1. Incident Name:</b> Lush Fire 199		<b>2. Operational Period:</b> Date From: 7/26/25 Time From: 0700		Date To: 7/27/25 Time To: 0700			
<b>3. Medical Aid Stations:</b>							
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?				
Tony Meiklejohn	ICP (next to helicopters/boat launch)	CMD 1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
			<input type="checkbox"/> Yes <input type="checkbox"/> No				
Trina McCandless, MEDL	ICP	CMD 1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	non-emergency: cell (907) 305-0979		<input type="checkbox"/> Yes <input type="checkbox"/> No				
	or Sat Phone: +88 165-245-2403		<input type="checkbox"/> Yes <input type="checkbox"/> No				
			<input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>4. Transportation</b> (indicate air or ground):							
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service				
Life Med-King Air	Fairbanks-75m to ICP, 35m to FMH	800-478-5433*	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS				
Guardian- King Air	Fairbanks-75m to ICP, 35m to FMH	888-997-3822*	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS				
Yukon Response-AMBO	65° 51.24', -149° 43.93', 190m (>3h) to FMH	907-450-4607	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS				
Steese VFD-AMBO	Fairbanks- Intercepts with Y Response	Arranged by Y Response	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS				
<b>5. Hospitals:</b>							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/ Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
Fairbanks Memorial	64° 49.90', -147° 44.53'	907-458-5555x1	~45 min	~5-6 hrs	<input checked="" type="checkbox"/> Yes Level: III	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Providence Alaska	61° 11.35', -149° 49.31'	907-212-3111x1	~3 h		<input checked="" type="checkbox"/> Yes Level: II	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Harborview Seattle	47° 36. 170', -122° 19.480'	206-744-4074	~4.5h		<input checked="" type="checkbox"/> Yes Level: I	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>6. Special Medical Emergency Procedures:</b> Meiklejohn/McCandless have advanced airways, chest needle decompression kits, and expanded scope medications. IF NO AIRCRAFT AVAILABLE TO H SPOTS OR OUT OF AIRSTRIP: Ground/water Medical Evac Plan: Start patient via boat to E.L. Patton Yukon River Bridge landing (65° 52.73', -149° 43.28'). Initiate contact with Yukon Response Base to request ALS Ambulance intercept at the landing. Initiate contact with the Rescue Coordination Center through dispatch for intel on if aircraft interception at another location en route is possible. NIGHT: Boat Drivers via Boat TFL (TAC 2) SHORT HAUL: Wenatchee (at Himalaya Fire) order via dispatch. HOIST: AK Air National Guard ( Fairbanks Mon-Fri) order via dispatch (via Troopers via RCC). ALWAYS HAVE A BACKUP PLAN.							
<input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.							
<b>7. Prepared by</b> (Medical Unit Leader): Name: K. McCandless Signature:							
<b>8. Approved by</b> (Safety Officer): Name: _____ Signature: _____							
ICS 206		IAP Page _____		Date/Time: 7/25/25 16:00			

Medical Incident Report					
<b>FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.</b>					
<b>FOR A MEDICAL EMERGENCY: IDENTIFY ON-SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.</b>					
Use the following items to communicate situation to communications / dispatch.					
<b>1. CONTACT COMMUNICATIONS / DISPATCH</b> (Verify correct frequency prior to starting report) Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."					
<b>2. INCIDENT STATUS:</b> Provide incident summary (including number of patients) 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."					
Severity of Emergency / Transport Priority	<input type="checkbox"/> <b>RED / PRIORITY 1</b> Life or limb threatening injury or illness. Evacuation need is <b>IMMEDIATE</b> Ex: Unconscious, difficulty breathing, bleeding severely, 2° – 3° burns more than 4 palm sizes, heat stroke, disoriented.				
	<input type="checkbox"/> <b>YELLOW / PRIORITY 2</b> Serious Injury or illness. Evacuation may be <b>DELAYED</b> if necessary Ex: Significant trauma, unable to walk, 2° – 3° burns not more than 1-3 palm sizes.				
	<input type="checkbox"/> <b>GREEN / PRIORITY 3</b> Minor Injury or illness. Non-Emergency transport Ex: Sprains, strains, minor heat-related illness.				
	<input type="checkbox"/> <b>Purple/Other Non Medical</b> other potential critical incidents Ex: Unaccounted for incident resources, threats to employees, chemical spills, incidents not requiring the use of ICS-206 but requiring IMT response				
Nature of Injury or Illness & Mechanism of Injury			Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)		
Evacuation 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)		
<b>3. INITIAL PATIENT ASSESSMENT:</b> Complete this section for each patient as applicable (start with the most severe patient)					
Patient Assessment: See IRPG PAGE 106					
Treatment:					
<b>4. EVACUATION PLAN:</b>					
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:					
<b>5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS:</b>					
Example: Paramedic/EMT, crews, immobilization devices, AED, oxygen, trauma bag, IV/fluid(s), splints, rope rescue, wheeled litter, HAZMAT, extrication					
<b>6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable</b>					
Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *
COMMAND					
AIR-TO-GRND					
TACTICAL					
<b>7. CONTINGENCY:</b> <u>Considerations:</u> If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead..					
<b>8. ADDITIONAL INFORMATION:</b> Updates/Changes, etc.					
<b>REMEMBER:</b> Confirm ETAs of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.					