

# Deuel Creek Fire

## UT-NWS-000296

### PNPS44 (1522)

7/7-8/2022

Incident Map/ IAP



Check- In



Spot Forecast for Deuel Creek  
National Weather Service Salt Lake City UT  
630 PM MDT Wed Jul 6 2022

.DISCUSSION...Little changes to the weather are expected over the next few days. Afternoons will feature winds out of the south-southwest with some moderate gusts, while nighttime winds will be more easterly/downslope with some higher overnight gusts. That said, winds should be slightly weaker Thursday compared to Wednesday, then become slightly stronger again on Friday. Temperatures will remain hot while humidities will continue to be low with poor overnight recoveries.

.THURSDAY...

Sky/weather.....Sunny (5-15 percent cloud cover).  
Chance of pcpn.....0 percent.  
CWR.....0 percent.  
LAL.....1.  
Max temperature.....95-98.  
Min humidity.....10-13%.  
Wind (20 ft).....East-southeast winds 6-10 mph with gusts to around 22 mph until 1000 then becoming south-southwest 8-14 mph with gusts to around 20 mph.  
Haines Index.....5 ..moderate.

.THURSDAY NIGHT...

Sky/weather.....Mostly clear (5-15 percent cloud cover).  
Chance of pcpn.....0 percent.  
CWR.....0 percent.  
LAL.....1.  
Min temperature.....70-73.  
Max humidity.....22-25%.  
Wind (20 ft).....Southwest winds 6-12 mph with gusts to around 20 mph becoming east-southeast 6-10 mph with gusts to around 22 mph after 2100.  
Haines Index.....6 ..high.

.FRIDAY...

Sky/weather.....Sunny (5-15 percent cloud cover).  
Chance of pcpn.....0 percent.  
CWR.....0 percent.  
LAL.....1.  
Max temperature.....97-100.  
Min humidity.....9-12%.  
Wind (20 ft).....East-southeast winds 6-10 mph with gusts to around 22 mph until 1000 then becoming south-southwest 9-15 mph with gusts to around 22 mph in the afternoon.  
Haines Index.....5 ..moderate.

## INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b> Deuel Creek	<b>2. Operational Period:</b> Date From: 7/7-8/22      Date To: 7/7-8/22 Time From: 0600      Time To: 2200															
<b>3. Objective(s):</b> 1. Provide for Public and Firefighter safety. Prioritize tactics that promote firefighter safety. 2. Utilize tactics necessary to support a full suppression strategy. 3. Keep fire east of residences, infrastructure in the city of Centerville, and fire break road; north of Deuel Creek; and south of Parrish Creek drainage. 4. Prevent loss and damage to any private and public facilities and infrastructure. 5. Take all steps to minimize exposure to COVID-19 for responders and public by practicing social distancing, maintaining proper hygiene, and wearing masks when social distancing is not attainable.																
<b>6. Operational Period Command Emphasis:</b>   General Situational Awareness Be aware of steep slopes, unburned canopy, rolling material, rattlesnakes, poison ivy Keep situational awareness high when working around aircraft. Reference Pg. 73 of IRPG.																
<b>5. Site Safety Plan Required?</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Approved Site Safety Plan(s) Located at:</b>																
<b>6. Incident Action Plan</b> (the items checked below are included in this Incident Action Plan): <table style="width: 100%; border: none;"> <tr> <td style="width: 20%;"><input checked="" type="checkbox"/> ICS 203</td> <td style="width: 20%;"><input type="checkbox"/> ICS 207</td> <td style="width: 60%;"><u>Other Attachments:</u></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 204</td> <td><input type="checkbox"/> ICS 208</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205</td> <td><input checked="" type="checkbox"/> Map/Chart</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input type="checkbox"/> ICS 205A</td> <td><input checked="" type="checkbox"/> Weather Forecast/Tides/Currents</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 206</td> <td></td> <td><input type="checkbox"/> _____</td> </tr> </table>		<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	<u>Other Attachments:</u>	<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart	<input type="checkbox"/> _____	<input type="checkbox"/> ICS 205A	<input checked="" type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> ICS 206		<input type="checkbox"/> _____
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<b>7. Prepared by:</b> Name: Sarah Flinders      Position/Title: PSC3      Signature: _____																
<b>8. Approved by Incident Commander:</b> Name: Nick Hillman      Signature:																
ICS 202	IAP Page _____	Date/Time: 07/6/22 2000														



## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> Deuel Creek		<b>2. Operational Period:</b> Date From: 07/7-8/2022 Date To: 07/7-8/2022 Time From: 0600 Time To: 2200		
<b>3. Incident Commander(s) and Command Staff:</b>		<b>7. Operations Section:</b>		
IC/UCs	Kevin Frank 801-598-5833	Chief		Field Ops
	Hank Shepard (t) 208-740-4323	Deputy		Planning Ops
Deputy		Staging Area		
Safety Officer		<b>Branch</b>		
Public Info. Officer		Branch Director		
Liaison Officer		Deputy		
<b>4. Agency/Organization Representatives:</b>		Division/Group	DIV A/Z	
Agency/Organization	Name	Division/Group		
USDA Forest Service	Russ Hanson	Division/Group		
State of Utah	Brian Trick	Division/Group		
		Division/Group		
		<b>Branch</b>		
		Branch Director		
		Deputy		
<b>5. Planning Section:</b>		Division/Group		
Chief		Division/Group		
Deputy		Division/Group		
Resources Unit		Division/Group		
Situation Unit		Division/Group		
Documentation Unit		<b>Branch</b>		
Demobilization Unit		Branch Director		
Technical Specialists		Deputy		
GISS		Division/Group		
		Division/Group		
		Division/Group		
<b>6. Logistics Section:</b>		Division/Group		
Chief		Division/Group		
Deputy		<b>Air Operations Branch</b>		
<b>Support Branch</b>		Air Ops Branch Dir.		
Director				
Base Camp				
Ordering Mgr		<b>8. Finance/Administration Section:</b>		
Ground Support Unit		Chief		
<b>Service Branch</b>		Deputy		
Director		Time Unit		
Communications Unit		Procurement Unit		
Medical Unit		Comp/Claims Unit		
Food Unit		Cost Unit		
<b>9. Prepared by:</b> Name: Sarah Flinders		Position/Title: PSC3		Signature:
ICS 203	IAP Page _____	Date/Time: 07/6/2022		





## ASSIGNMENT LIST (ICS 204)

<b>1. Incident Name:</b> Deuel Creek		<b>2. Operational Period:</b> Date From: 7/8/2022      Date To: 7/8/2022 Time From: 0600              Time To: 2200		<b>3.</b> Branch: Division: A/Z Group: Staging Area:																																																					
<b>4. Operations Personnel:</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><u>Name</u></td> <td style="width: 40%;"><u>Contact Number(s)</u></td> </tr> <tr> <td>Operations Section Chief: Kevin Frank</td> <td>801-598-5833</td> </tr> <tr> <td>Branch Director: _____</td> <td>_____</td> </tr> <tr> <td>Division/Group Supervisor: _____</td> <td>_____</td> </tr> </table>				<u>Name</u>	<u>Contact Number(s)</u>	Operations Section Chief: Kevin Frank	801-598-5833	Branch Director: _____	_____	Division/Group Supervisor: _____	_____																																														
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<b>6. Work Assignments:</b> Prioritize tactics that promote firefighter safety and favorable ground. Mop-up, patrol and secure the line in DIVA/Z. Continue implementation of fire line rehab standards.																																																									
<b>7. Special Instructions:</b> Be aware of steep slopes, unburned canopy, rolling material, rattlesnakes, poison ivy Stay Hydrated																																																									
<b>8. Communications</b> (radio and/or phone contact numbers needed for this assignment): <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"><u>Name/Function</u></td> <td style="width: 70%;"><u>Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</u></td> </tr> <tr> <td>TAC 1 / _____</td> <td>_____</td> </tr> <tr> <td>_____ / _____</td> <td>_____</td> </tr> <tr> <td>_____ / _____</td> <td>_____</td> </tr> <tr> <td>_____ / _____</td> <td>_____</td> </tr> </table>					<u>Name/Function</u>	<u>Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</u>	TAC 1 / _____	_____	_____ / _____	_____	_____ / _____	_____	_____ / _____	_____																																											
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ICS 204	IAP Page _____	Date/Time: <u>07/6/2022</u>																																																							

# INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

<b>1. Incident Name:</b> Deuel Creek		<b>2. Date/Time Prepared:</b> Date: 07/6/2022 Time: 1800		<b>3. Operational Period:</b> Date From: 07/7-8/22 Date To: 07/7-8/22 Time From: 0600 Time To: 2200						
<b>4. Basic Radio Channel Use:</b>										
Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks
		Command	Fairmont	Command	173.7750	N/A	164.9375	110.9	A	
		Operations	TAC 1	DIV A/Z	166.5000	N/A	166.5000	N/A	A	
		Air to Ground	A/G	Primary	169.2000		169.2000	N/A	A	
		Air to Air	A/A		124.9750		124.9750			
		Medivac	VMED 28	All	155.3400	N/A	155.3400	156.7		Local lifeflight only /not TAC channel
		Medivac	VMED 29	All	155.3475	N/A	155.3475	156.7		Local lifeflight only /not TAC channel
<b>5. Special Instructions:</b>										
<b>6. Prepared by (Communications Unit Leader):</b> Name: _____										Signature: _____
ICS 205			IAP Page _____			Date/Time: 7/6/2022- 1800				



# HEALTH AND SAFETY MESSAGE

INCIDENT: Deuel Creek

DATE: July 7-8, 2022

## Transition

Transitions are often a time of confusion. Ensure you and your crew knows the new command structure. Continue to maintain good communications with all of your personnel, remain flexible, look out for each other and continue to adhere to Lookouts; Communication; Escape Routes; Safety Zones

## Medical Emergencies

- Review and brief all personnel on the Medical Plan
- Know where the closest medical personnel and equipment are
- Ask yourself; how long will it take to stabilize and package an injured person?
- Ask yourself; how long will it take to move them to the closest medevac site or care facility?
- Ask yourself; how many people will it take to carry them out, are they available?
- Ask yourself; is the risk worth the gain?



## Communications

- Review the Communications Plan
- Ensure all of your radios are correctly programmed
- Test the frequencies to ensure adequate coverage
- If coverage is not adequate ensure mitigations are in place before committing to assignment
- Give good feedback to ensure problem areas can be addressed



**“Man this stuff is great. Don’t forget to keep up on your fluids.”**



## MEDICAL PLAN (ICS 206), Adapted for FDA

<b>1. Incident Name:</b> Deuel Creek		<b>2. Operational Period:</b> 7/7-8/2022				
<b>3. Medical Aid Stations:</b>						
Name	Location	Contact Number(s)/Frequency		Paramedics on Site?		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>4. Transportation:</b>						
Ambulance Service	Location	Contact Number(s)/Frequency		Level of Service		
South Davis Metro F.D.	Station 83 343 S Main St, Centerville, UT 84014	911		<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS		
South Davis Metro F.D.	Station 84 1995 Bountiful Blvd #1616, Bountiful, UT 84010	911		<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS		
				<input type="checkbox"/> ALS <input type="checkbox"/> BLS		
				<input type="checkbox"/> ALS <input type="checkbox"/> BLS		
<b>5. Hospitals:</b>						
Hospital Name	Address	Contact Number(s)	Travel Time	Trauma Center	Burn Center	Helipad
University of Utah Medical Center	50 N. Medical Drive Salt Lake City, UT 84132	801-581-2121	30 min ground 15 min air	<input checked="" type="checkbox"/> Yes Level: 1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Davis Hospital & Medical Center	1600 W. Antelope Dr. Layton UT 8401	801-807-1000	20 min ground 10 min air	<input checked="" type="checkbox"/> Yes Level: 1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>6. Special Medical Emergency Procedures:</b>						
<b>7. Prepared by (Safety Officer):</b> Name: Jeff Sanocki _____ Signature: _____						
<b>8. Approved by (Incident Commander):</b> Name: _____ Signature: _____						
ICS 206	IAP Page _____	Date/Time: _____				

# MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

## Medical Incident Report

**FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.**

**FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.**

**Use the following items to communicate situation to communications/dispatch.**

**1. CONTACT COMMUNICATIONS / DISPATCH** (Verify correct frequency prior to starting report)

*Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."*

**2. INCIDENT STATUS:** 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 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE</b> <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2<sup>o</sup> – 3<sup>o</sup> burns more than 4 palm sizes, heat stroke, disoriented.</i> <input type="checkbox"/> <b>YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary.</b> <i>Ex: Significant trauma, unable to walk, 2<sup>o</sup> – 3<sup>o</sup> burns not more than 1-3 palm sizes.</i> <input type="checkbox"/> <b>GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport</b> <i>Ex: Sprains, strains, minor heat-related illness.</i>	
Nature of Injury or Illness & Mechanism of Injury		<i>Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)</i>
Transport Request		<i>Air Ambulance / Short Haul/Hoist Ground Ambulance / Other</i>
Patient Location		<i>Descriptive Location &amp; Lat. / Long. (WGS84)</i>
Incident Name		<i>Geographic Name + "Medical" (Ex: Trout Meadow Medical)</i>
On-Scene Incident Commander		<i>Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)</i>
Patient Care		<i>Name of Care Provider (Ex: EMT Smith)</i>

**3. INITIAL PATIENT ASSESSMENT:** Complete this section for each patient as applicable (start with the most severe patient)

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.





