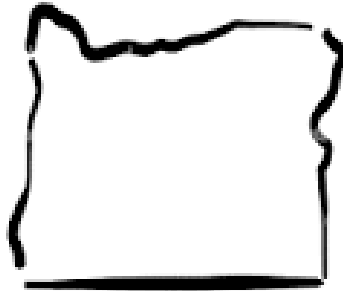


# LONE ROCK

OR-PRD-000404

PDR3ET(1522)



OREGON

---

**JULY 15TH 2024**  
**0700-2200**

**CHECK-IN**



**MAPS & LAP**



Send CTRs to this email:  
[2024.0404rvlonerock.finance@firenet.gov](mailto:2024.0404rvlonerock.finance@firenet.gov)

# INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:	2. Operational Period: Date From: _____ Time From: _____	Date To: _____ Time To: _____											
3. Objective(s):													
4. Operational Period Command Emphasis:													
General Situational Awareness													
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input type="checkbox"/> Approved Site Safety Plan(s) Located at:													
6. Incident Action Plan (the items checked below are included in this Incident Action Plan): <table border="0"><tr><td><input type="checkbox"/> ICS 203</td><td><input type="checkbox"/> ICS 207</td><td rowspan="5">Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____</td></tr><tr><td><input type="checkbox"/> ICS 204</td><td><input type="checkbox"/> ICS 208</td></tr><tr><td><input type="checkbox"/> ICS 205</td><td><input type="checkbox"/> Map/Chart</td></tr><tr><td><input type="checkbox"/> ICS 205A</td><td><input type="checkbox"/> Weather Forecast/Tides/Currents</td></tr><tr><td><input type="checkbox"/> ICS 206</td><td></td></tr></table>			<input type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input type="checkbox"/> ICS 205	<input type="checkbox"/> Map/Chart	<input type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/> ICS 206	
<input type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____											
<input type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208												
<input type="checkbox"/> ICS 205	<input type="checkbox"/> Map/Chart												
<input type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents												
<input type="checkbox"/> ICS 206													
7. Prepared by: Name: _____	Position/Title: _____	Signature: <i>Charlie Rucker</i>											
8. Approved by Incident Commander: Name: _____ Signature: <i>Fulton Jeansson</i>													
ICS 202	IAP Page _____	Date/Time: _____											

**Spot Forecast for lone rock.**

National Weather Service Pendleton OR  
743 PM PDT Sun Jul 14 2024

Forecast is based on forecast start time of 0700 PDT on July 15.  
\*\*\*Thunderstorms imply gusty and erratic winds\*\*\*  
\*\*\*Winds are 20 foot 10-minute averages\*\*\*  
\*\*\*CWR-Chance of wetting rain 0.10 or greater\*\*\*

...RED FLAG WARNING IN EFFECT UNTIL 9 PM PDT THIS EVENING...  
...HEAT ADVISORY IN EFFECT UNTIL 10 PM PDT THIS EVENING...

.DISCUSSION...High pressure over the region will continue to produce hot and dry conditions across the fire area. Breezy west winds will redevelop Monday afternoon, but are not expected to be as strong as today(Sunday). Winds will weaken Monday night, and be below 10 mph Monday afternoon, but will switch from the south to the north through the day. While dry conditions mostly continue through Tuesday, a system clipping the region will bring slight chances (~15-20%) of isolated thunderstorms late Tuesday afternoon through the evening. RHs will be in the single digits to teens, with poor overnight recoveries.

.MONDAY...

Sky/weather.....Sunny (15-25 percent). Haze and patchy smoke late in the morning.  
CWR.....0 percent.  
LAL.....1.  
Max temperature.....90-93.  
Min humidity.....8-13 percent.  
Wind (20 ft).....Southwest winds 6 to 11 mph shifting to the west 8 to 13 mph late in the morning, then shifting to the northwest late in the afternoon.  
Ridgetop wind.....Southwest winds 7 to 13 mph shifting to the west 10 to 15 mph late in the morning, then shifting to the northwest late in the afternoon.  
Mixing height.....5500 ft AGL early in the morning.  
Transport winds.....West 12 to 16 mph becoming around 14 mph late in the afternoon.  
Haines Index.....5 or moderate potential for large plume dominated fire growth.

TIME (PDT)	7 AM	9 AM	11 AM	1 PM	3 PM	5 PM
Temp.....	67	75	81	86	90	90
RH.....	37	28	21	16	13	13
20 ft wind.....	SW 11	W 11	W 13	W 13	W 13	NW 13
20 ft wind gust.		14	17	17	18	18

.MONDAY NIGHT...

Sky/weather.....Mostly clear (10-20 percent). Haze and patchy smoke in the evening.

CWR.....0 percent.  
LAL.....1.  
Min temperature.....63-66.  
Max humidity.....27-32 percent.  
Wind (20 ft).....Northwest winds 6 to 13 mph shifting to the  
south 5 to 8 mph overnight.  
Ridgetop wind.....Northwest winds 10 to 15 mph shifting to the  
south 5 to 10 mph overnight.  
Mixing height.....5000 ft AGL early in the evening.  
Transport winds.....West 9 to 14 mph shifting to the south 8 to 9  
mph overnight.  
Haines Index.....5 or moderate potential for large plume  
dominated fire growth.

.TUESDAY...

Sky/weather.....Sunny (5-15 percent).  
CWR.....1 percent.  
LAL.....1.  
Max temperature.....94-97.  
Min humidity.....6-11 percent.  
Wind (20 ft).....South winds 5 to 8 mph shifting to the  
northwest late in the morning, then shifting to  
the north 5 to 10 mph late in the afternoon.  
Ridgetop wind.....South winds 5 to 10 mph shifting to the west  
late in the morning, then shifting to  
north  
in the afternoon.  
Mixing height.....10100 ft AGL early in the morning.  
Transport winds.....Southwest 7 to 9 mph shifting to the northwest  
around 9 mph late in the afternoon.  
Haines Index.....4 to 6 or low to high potential for large plume  
dominated fire growth.



## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> Lone Rock		<b>2. Operational Period:</b> Date From: 7/15/2024 Date To: 7/15/2024 Time From: 0700 Time To: 2200			
<b>3. Incident Commander(s) and Command Staff:</b>			<b>7. Operations Section:</b>		
IC	Fulton Jeansonne	409-926-6766	OPS3	<name>	<phone #>
Deputy IC	Keith Fields	423-303-9070	Planning Ops	Aaron Radford	334-832-8986
Public Info. Officer	Chris Derman	571-334-2440	Field Ops	Chris Witkus	828 778-2076
Liaison Officer	Mike Wilkins	828-421-0707			
Safety Officer	Sammie Mcfarland	580-380-9680	DIVS	Alpha	Dustin Dill (TFLD)
					318-413-9068
					Chris Wilson (TFLD-t)
					423-457-0375
					Foxtrot
					Craig Moore
					205 412-3290
					Charlie Gray (t)
					706 473-2190
<b>4. Agency/Organization Representatives:</b>					David Gones (t)
					314 809-3980
AA-BLM	Kyle Hensley	503-522-8844	PAPA	Derrick Orrell	479 886-5385
AA-BLM	James Purswell	509-254-7177		Chad Duneheew (t)	865 415-7884
AA-ODF	Kiel Nairns	503-949-6329	Zulu	Dustin Thompson	541 951-7695
Gillian Co. Road Master	Dooley Kennedy	503-522-8844		Russell Pactor (t)	276-275-7106
Gillian Co. EM	Chris Fitzsimmons	541-980-7605		William Hilton (t)	870 214-8574
Gillian Co Sheriff	Gary Bettercourt	541-980-7604	India	James Hayes	541-263-0936
OSFM	Mark Jotson	971-301-0793	**IA GROUP	William Hilton (TFLD)	870-214-8574
<b>5. Planning Section:</b>					
PSC3	Charlie Rucker	540-613-7791	SOFR	Lem Johnson	606-246-0646
GISS	Travis Clapp	361-500-5918		Stacy Lovell	918-564-3267
ITSS	Geoff Holden	505-850-3308			
SCKN	Mike Strange	352-231-0845			
SCKN(t)	Chris Adams (t)	606-594-4669			
<b>6. Logistics Section:</b>			<b>7. Finance Section:</b>		
LSC3	Mike Moran	732-904-5966	FSC3	Tammy Russell	281-806-1845
LSC3	Jason Mchann	865-223-4415	Time	Judy Goodner(t)	580-306-3214
LSC3	Lannie Rice	407-744-7711	Time	Channing Waldrop (t)	828-637-0515
LSC3	George Woodruff	757-288-9092	FSC3	Ashley Charlton	970 629 0192
GSUL	Jimmy Brown	423-462-5460	EQPT	Jamie Hall	417 967 6831
COML	Ronald Reagen	828-772-8514	PTRC	Sandra Krzewinski	414 345 0734
ORDM	Leigh Ostin	352-445-1366	PTRC (v)	Angelique Gonzales	865 440 6474
MEDL	Jeffrey Cummings	317-730-6653			
MEDL	Wilson Rowell	334-504-2608			
<b>Support Branch</b>			<b>Air Operations Branch</b>		
				Wes Bentley (HEBM)	864-888-7553
<b>9. Prepared by:</b> Name: C Rucker			Position/Title: PSC3 Date/		Signature:
ICS 203	IAP Page _____		Time: 7/15/2024		

## ASSIGNMENT LIST (ICS 204)

1. Incident Name: <b>Lone Rock</b>		2. Operational Period: 7/15/24 0700 to 7/15/2024 2200	3. Branch: Division: Alpha Group: Staging Area:
4. Operations Personnel: <u>Name</u> Operations Section Chief: <u>Field Ops – Chris Witkus</u> Branch Coordinator: _____ Division/Group Supervisor: <u>Dustin Dill (TFLD), Chris Wilson (TFLD)</u>			
5. Resources Assigned:			
<b>Resource Identifier</b>	<b>LWD</b>	<b>Leader</b>	<b># of Persons</b>
6. Work Assignments: •			
7. Special Instructions: •			
8. Communications (radio and/or phone contact numbers needed for this assignment): Name/Function _____ Primary Contact: indicate cell, or radio (frequency/system/channel) _____ / Tactical _____ / Cmd _____ / Air-to-Ground – Fixed Wing _____ / Air-to-Ground - Helicopters _____ / Medical Coordination _____			
9. Prepared by: Name: Charlie Rucker		Position/Title: PSC3 Signature: _____	
ICS 204		Date/Time: <u>07/14/2024</u>	

# ASSIGNMENT LIST (ICS 204)

1. Incident Name: <b>Lone Rock</b>		2. Operational Period: 7/15/24 0700 to 7/15/2024 2200		3. Branch: Division: Foxtrot Group: Staging Area:		
4. Operations Personnel: <u>Name</u> Operations Section Chief: <u>Field Ops – Chris Witkus</u> Branch Coordinator: _____ Division/Group Supervisor: <u>Criag Moore , Charlie Gray (t), David Gones (TFLD(t))</u>						
5. Resources Assigned:		LWD	Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information
Resource Identifier						
6. Work Assignments: •						
7. Special Instructions: •						
8. Communications (radio and/or phone contact numbers needed for this assignment): Name/Function _____ Primary Contact: indicate cell, or radio (frequency/system/channel) _____ / Tactical _____ / Cmd _____ / Air-to-Ground – Fixed Wing _____ / Air-to-Ground - Helicopters _____ / Medical Coordination _____						
9. Prepared by: Name: Charlie Rucker		Position/Title: PSC3		Signature: _____		
ICS 204		Date/Time: <u>07/14/2024</u>				

### ASSIGNMENT LIST (ICS 204)

1. Incident Name: <b>Lone Rock</b>		2. Operational Period: <i>7/15/24 0700 to 7/15/2024 2200</i>			3. Branch: Division: PAPA Group: Staging Area:	
4. Operations Personnel: <b>Name</b>						
Operations Section Chief: <u>Field Ops – Chris Witkus</u>						
Branch Coordinator: _____						
Division/Group Supervisor: <u>Derrick Orrell , Chad Duneheuw (t)</u>						
5. Resources Assigned:						
Resource Identifier	LWD	Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information	
6. Work Assignments: <ul style="list-style-type: none"><li>•</li></ul>						
7. Special Instructions: <ul style="list-style-type: none"><li>•</li></ul>						
8. Communications (radio and/or phone contact numbers needed for this assignment): Name/Function _____ Primary Contact: indicate cell, or radio (frequency/system/channel) _____ / Tactical _____ / Cmd _____ / Air-to-Ground – Fixed Wing _____ / Air-to-Ground - Helicopters _____ / Medical Coordination _____						
9. Prepared by: Name: Charlie Rucker			Position/Title: PSC3 Signature:			
ICS 204			Date/Time: <u>07/14/2024</u>			







# ASSIGNMENT LIST (ICS 204)

<b>1. Incident Name:</b> Lone Rock		<b>2. Operational Period:</b> 7/15/24 0700 to 7/15/2024 2200	<b>3. Branch:</b> Division: Group: IA Staging Area:		
<b>4. Operations Personnel:</b> <u>Name</u> <b>Operations Section Chief:</b> <u>Field Ops – Chris Witkus</u> <b>Branch Coordinator:</b> _____ <b>Division/Group Supervisor:</b> <u>William Hilton (TFLD)</u> _____					
<b>5. Resources Assigned:</b>					
<b>Resource Identifier</b>	<b>LWD</b>	<b>Leader</b>	<b># of Persons</b>		
<b>6. Work Assignments:</b> <ul style="list-style-type: none"> <li>•</li> </ul>					
<b>7. Special Instructions:</b> <ul style="list-style-type: none"> <li>•</li> </ul>					
<b>8. Communications</b> (radio and/or phone contact numbers needed for this assignment): <u>Name/Function</u> _____ <u>Primary Contact:</u> indicate cell, or radio (frequency/system/channel) _____ <u>/ Tactical</u> _____ <u>/ Cmd</u> _____ <u>/ Air-to-Ground – Fixed Wing</u> _____ <u>/ Air-to-Ground - Helicopters</u> _____ <u>/ Medical Coordination</u> _____					
<b>9. Prepared by:</b> Name: Charlie Rucker			Position/Title: PSC3    Signature:		
<b>ICS 204</b>		Date/Time: <u>07/14/2024</u>			

# INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

<b>1. Incident Name:</b> Lone Rock OR-PRD-000404	<b>2. Date/Time Prepared:</b> Date: 07/14/2024 Time: 2200	<b>3. Operational Period:</b> Date From: _____ Date To: _____ Time From: _____ Time To: _____
--	---	---

4. Basic Radio Channel Use:											
Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	RX Freq N or W	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks
	1		Air to Ground		166.600 0		166.600 0	127.3			
	2		Air to Ground, 2		167.062 5		167.062 5	167.062 5			
	3		BLM Tactical		173.675		173.675	173.675			
	4		BLM Tygh Ridge Rptr		172.65	100	172.65	163.15	100		
	5		BLM Haystack Butte Rptr (tentative)		172.65	127.3	172.65	163.15	127.3		
	6		BLM Rancheria Rock Rptr		172.65	107.2	172.65	163.15	107.2		
	7		BLM Grizzly Rptr		173.837 5	173.8	173.837 5	166.225	173.8		
	8		Mt.Hood NF Hays Haystack Butte		169.95	127.3	169.95	164.875	127.3		

**5. Special Instructions:**

<b>6. Prepared by (Communications Unit Leader) Name:</b> _____	<b>Signature:</b> _____
<b>ICS 205</b>	<b>IAP Page</b> _____
	<b>Date/Time:</b> _____

# INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

<b>1. Incident Name:</b> Lone Rock OR-PRD-000404		<b>2. Date/Time Prepared:</b> Date: 07/14/2024 Time: 2200		<b>3. Operational Period:</b> Date From: _____ Time From: _____ Date To: _____ Time To: _____							
<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	
	9		Mt. Hood NF Flag Point Rptr		169.925	123	162.6125	114.8			
	10		USFS Project		168.675	123	168.675	123			
	11		G WORK 1		169.125	127.3	169.125	127.3			
	12		ODF Dalles Rpt (Stacker)		151.4375	162.2	159.3975	151.4			
	13		ODF Red Net		151.34	151.34	151.34	156.7			
	14		Fire South Rptr Flag Point		159.06	D703	153.965	D703			
	15		Fire South Rptr BakeOven		159.06	D703	153.965	D423			
	16		Airguard		168.625	NONE	168.625	110.9			
<b>5. Special Instructions:</b>											
<b>6. Prepared by (Communications Unit Leader) Name:</b> _____						<b>Signature:</b> _____					
<b>ICS 205</b>			<b>IAP Page</b> _____			<b>Date/Time:</b> _____			<b>Signature:</b> _____		

# SAFETY MESSAGE

## WHAT IS LEADERSHIP TO YOU?

**LEADER**



**SHIP**



Copyright © 2011/2012

### Values & Principles

- Be proficient in your job, both technically and as a leader.
- Make sound and timely decisions.
- Ensure that tasks are understood, supervised, accomplished.
- Develop your people for the future.

## 6 Principles of good Leaders

***#1: To be a good leader, you must first be a good follower.***

***#2: Leadership isn't about ability but rather responsibility and accountability.***

***#3: Leaders will believe in structure and discipline.***

***#4: Authentic leadership begins when you are alone.***

***#5: Good leaders operate by a code of loyalty.***

***#6: There are different levels of leadership.***

**LEADERSHIP STARTS WITH YOU!**

# MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

<b>1. Incident/Project Name</b>				<b>2. Operational Period</b>			
<b>Lone Rock Fire</b>				Date/Time <b>07/15/2024 0600-2000</b>			
<b>3. Ambulance Services</b>							
Name	Complete Address	Phone & EMS Frequency	Advanced Life Support (ALS)				
			Yes	No			
<b>South Gilliam County Rural Fire Protection District</b>	<b>220 N. Main Condon, OR 97823</b>	<b>911 / (541)-384-5555</b>	<b>X</b>				
<b>4. Air Ambulance Services</b>							
Name	Phone	Address and Coordinates					
<b>Life Flight</b>	<b>1(800)-232-0911</b>	<b>22285 Yellow Gate, Suite 102 Aurora OR 97002  45°14.70362N, -122°46.05338'W</b>					
<b>5. Hospitals</b>							
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	
<b>Legacy Emanuel Medical Center</b> 2801 N Gantenbein Ave, Portland, OR 97227	Lat: <b>45°32.68049'N</b>	<b>1.5hr</b>	<b>2.5hr</b>	<b>(503) 413-2200</b>	<b>X</b>	<input type="checkbox"/>	<b>Level 1 Trauma Center/Burn Center</b>
	Long: <b>-122°40.26051'W</b>						
	VHF:						
<b>Oregon Health &amp; Science University (OHSU)</b> 3181 SW Sam Jackson Rd, Portland OR 97235	Lat: <b>45°29.96827'N</b>	<b>1.5hr</b>	<b>3hr</b>	<b>(503) 494-8573</b>	<b>X</b>	<input type="checkbox"/>	<b>Level 1 Trauma Center</b>
	Long: <b>-122°41.09678'W</b>						
	VHF:						
<b>Adventist Health Columbia Gorge</b> 1700 E. 19 <sup>th</sup> Street, The Dalles, OR 97058	Lat: <b>45°35.26015'N</b>	<b>30 min</b>	<b>1hr</b>	<b>(541) 296-1111</b>	<b>X</b>	<input type="checkbox"/>	<b>Level 3 Trauma Center</b>
	Long: <b>-121°09.81194'W</b>						
	VHF:						
<b>Pioneer Memorial Hospital</b> 564 Pioneer Dr, Heppner OR 97836	Lat: <b>45°21.35503'N</b>	<b>20 mins</b>	<b>55 mins</b>	<b>(541)676-9133</b>	<b>X</b>	<input type="checkbox"/>	<b>Level 4 Trauma Center</b>
	Long: <b>-119°32.92272'W</b>						
	VHF:						

<b>Good Shepherd Medical Center</b> 610 NW 11 <sup>th</sup> St, Hermiston, OR 97838	<b>Lat:</b> <b>45°50.82315'N</b>	<b>45</b> <b>min</b>	<b>1.5hr</b>	<b>(541)667-3400</b>	<b>X</b>	<input type="checkbox"/>	<b>Level 3 Trauma Center</b>
	<b>Long:</b> <b>-119°18.53703'W</b>						
	<b>VHF:</b>						
	<b>Lat:</b>						
	<b>Long:</b>						
	<b>VHF:</b>						



6. Division   Branch   Group	Area Location Capability	
London ICP	EMS Responders & Capability:	
	Equipment Available on Scene:	
	Medical Emergency Channel:	
	ETA for Ambulance to Scene:	
	Air:	
	Ground:	
	Approved Helispot:	
	Lat:	
	Long:	
Division A/Z	EMS Responders & Capability:	
	Equipment Available on Scene:	
	Medical Emergency Channel:	
	ETA for Ambulance to Scene:	
	Air:	
	Ground:	
	Approved Helispot:	
	Lat:	
	Long:	

8. Prepared By (Medical Unit Leader)	9. Date/Time	10. Reviewed By (Safety Officer)	11. Date/Time

#### IWI IC Responsibilities

**\*\* Special instructions for Emergency Communications: Contact Winchester Dispatch on radio or local 911 via cell phone\*\***

**\*\* Medical person providing care must request type of transportation as early as possible (i.e.: air or ground) \*\***

- Take charge of the scene – inform Division/Operations and Dispatch that you are the IWI IC and establish radio communications (frequencies, channels). Identify the emergency name – *for example – Division A medical, Fish Meadow medical, HWY 21 accident.*
- Ensure first aid is provided to patient. Request additional medical resources on division/branch or across incident. Transmit patient information to Dispatch using the Medical Incident Report on back of IAP.
- Determine patient transportation through consultation with line medical personnel or Medical Unit Leader. Consider transport time, risk to personnel, destination facility and available operational resources. If air transport is chosen, start ground ambulance for contingency. Order transportation resources through Dispatch or local 911 AS EARLY AS POSSIBLE. Assign ground contact to communicate with incoming aircraft if local EMS/FD is not coordinating that effort.
- Notify Communications as resources arrive and any patient status changes. Name of injured or deceased individuals will not be transmitted.
- Initiate documentation for future investigation; if a line safety office is available, assign them to lead documentation. Do not move deceased individuals, gear, or personal effects except to accomplish rescue work or protect the safety of others. Obtain written documentation of witnesses.
- The Unit Log ICS 214 may be used for the initial documentation, but a subsequent narrative will be required.
- As appropriate, conduct an After-Action Review to determine successes, areas to improve and lessons learned.

FINANCE

CTR'S TURNED IN DAILY MAILED TO [2024.0404rvlonerock.finance@firenetgov](mailto:2024.0404rvlonerock.finance@firenetgov)

JUSTIFICATION FOR NO LUNCH BREAK TAKEN

ANY HOURS OVER 16 MUST BE MITIGATED

ANY QUESTION PLEASE CONTACT FINANCE.



# 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° – 3° 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° – 3° 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>
Evacuation 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. EVACUATION 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 ETAs of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.