

INCIDENT ACTION PLAN

 ORIGINAL

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# SADDLE MOUNTAIN FIRE

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**Wednesday, July 8, 2020**

**0700-1900 Operational Period**

WA-MCR-2020-000291

CSE-221

PR-M8YW-1502



# INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b>	<b>2. Operational Period: DAY SHIFT</b>	
SADDLE MOUNTAIN	Date/Time From: 07/08/2020 0700      WED	Date/Time To: 07/08/2020 1900      WED

**3. Objective(s):**

Provide for the safety of firefighters and the public through applying appropriate risk mitigation in all actions while fighting fire aggressively. This includes the application of the 10 and 18, LCES and risk management process at all times.

Engage and take suppression actions to limit burned acreage growth within established lines.

Maintain best management practices to limit the spread and exposure of the COVID-19 virus within the crew, on the line, in camp or to the surrounding community.

Act in a positive and professional manner to foster good relationships with the public, landowners, stakeholders, and agencies represented. Providing timely communications and accurate information as it becomes available.

Maximize opportunities for cost savings without jeopardizing public or firefighter safety.

Maintain awareness of impact on the landscape, including areas of eco-systems or habitat, minimize and report damage in areas that may be effected and implement tactics accordingly.

**4. Operational Period Command Emphasis:**

Today's focus will be on patrol and securing the fire perimeter. Use your risk management decision processes to mitigate any risk of injury or fire damage. Keep all emerging fires as small as possible. Active firefighters provide a positive image of the fire service and good public interactions. Be safe and take care of each other

- General Situational Awareness:**
- Provide for firefighter and public safety at all times.
  - Monitor compliance of 10 and 18 by all incident personnel.
  - Adhere to 2:1 work/rest ratio for all fire line personnel.
  - Aviation safety is high priority. Assess the risk against the benefit of the mission.
  - Ensure all assigned personnel understand emergency medical reporting & transport procedures including locations of nearest emergency responders & facilities.

**5. Site Safety Plan Required?**      Yes       No

**Approved Site Safety Plan(s) Located at:**

**6. Incident Action Plan** (the items checked below are included in this Incident Action Plan):

<input checked="" type="checkbox"/> ICS 202	<input type="checkbox"/> ICS 207	Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 208	
<input checked="" type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 220	
<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart	
<input type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents	
<input checked="" type="checkbox"/> ICS 206		

<b>7. Prepared by:</b> FRED KNOWLES	Position/Title: RESL	Signature: _____
<b>8. Approved by Incident Commander:</b>	Name: <u>LEONARD JOHNSON</u>	Signature: <u>[Signature]</u>
ICS 202	IAP Page	Date/Time: _____

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b>		<b>2. Operational Period: DAY SHIFT</b>	
SADDLE MOUNTAIN		Date/Time From: 07/08/2020 0700	Date/Time To: 07/08/2020 1900
		WED	WED
<b>3. Incident Commander(s) and Command Staff:</b>			
IC/UC	JOHNSON, LEONARD 360-581-9672		AIR TANKER COORDINATOR
SAFETY OFFICER	HARRIS, MICHAEL 509-572-0064		<b>8. Finance/Administration Section:</b>
SAFETY OFFICER	FOSS, KEN 253-318-2678 (T)		
INFORMATION OFFICER	SHEARER, BEN 509-492-1461		
<b>4. Agency/Organization Representative(s):</b>			
Agency/Organization	Name		
USFW	JANAK, JOHN		
USFW	WHITFIELD, SHERI 435-817-2750		
BLM	DIMKE, JEFF		
<b>5. Planning Section:</b>			
CHIEF	SCHARNHORST, RYAN 509-432-1016		
DEPUTY	WINTER, DAVID 509-301-2631		
RESOURCES UNIT	KNOWLES, FRED		
SITUATION UNIT			
<b>6. Logistics Section:</b>			
CHIEF	PRESTON, CINDY 509-607-9724		
CHIEF	SELL, KEVIN 509-521-0670 (T)		
DEPUTY	AMBROSE, JOSH 360-310-0401		
GROUND SUPPORT UNIT	WILLIAMS, KEN 509-521-9681		
COMMUNICATIONS UNIT	ALEXANDER, KEVIN 360-640-5506		
MEDICAL UNIT			
<b>7. Operations Section:</b>			
DAY OPS SECTION CHIEF	HATLEY, TOM 509-953-8933		
OPS SECTION CHIEF			
STAGING AREA			
DIVISION/GROUP	MIKE	JONES, SETH 509-961-4870	
DIVISION/GROUP	LIMA	SEWELL, STEPHEN 509-929-3391	
DIVISION/GROUP	ALPHA/ZULU	TSUBOTA, JORDAN 541-980-1110	
<b>7b. Air Operations Branch:</b>			
AIR OPS BRANCH DIRECTOR			
AIR ATTACK SUPERVISOR			
AIR SUPPORT SUPERVISOR			
HELICOPTER COORDINATOR			
AIR TANKER COORDINATOR			
<b>9. Prepared By:</b>	Name: KNOWLES, FRED	Position/Title: RESL	Signature:
ICS 203	IAP Page	Date/Time: 07/07/2020 1710	

**WEATHER**

1. Incident Name

Saddle Mountain

2. Date Prepared

7/7/2020

3. Time Prepared

2100

.WEDNESDAY...

Sky/weather.....Sunny.

CWR.....0 percent.

LAL.....1.

Max temperature.....78.

Min humidity.....28 percent.

Wind (20 ft).....Southwest winds 4 to 8 mph becoming west or northwest 6 to 9 mph around 1800 pdt.

Mixing height.....As high as 5900 ft AGL between 1300 and 1900 pdt.

Transport winds.....Southwest 7 to 10 mph.

Haines Index.....3 or very low potential for large plume dominated fire growth.

9. Prepared by (Name and Position)

*Ryan Scharnhorst*

**Division/Group Assignment List (ICS 204 WF)**  
Controlled Unclassified Information//Basic

<b>1. Incident Name:</b>		<b>3.</b>	
SADDLE MOUNTAIN		Branch:	Division/Group:  <b>ALPHA</b>
<b>2. Operational Period:</b> DAY SHIFT			
Date/Time From: 07/08/2020 0700 WED	Date/Time To: 07/08/2020 1900 WED		

4. Operations Personnel			
<b>OPERATIONS CHIEF</b>	HATLEY, TOM 509-953-8933	<b>DIVISION/GROUP SUPERVISOR</b>	TSUBOTA, JORDAN 541-980-1110
<b>AIR ATTACK SUPERVISOR</b>			

5. Resources Assigned this Period					
Strike Team / Task Force / Resource Designator	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
C-6 NORTH COLUMBIA TYPE 2IA	07/20	CHESTER, DYLAN	21		
C-8 CHELAN TYPE 2IA			20		
E-22 D & D FIRE SUPPRESSION	07/20	PARKER, J. T.	3		
E-23 LATE SUMMER WILDFIRE	07/20	BECK JR., BRADLEY	3		
E-24 EARLY WINTERS	07/20	HENDRIX, JACK	3		
E-25 RAINIER WILDFIRE	07/20	DITTMANN, DAMON	3		

**6. Control Operations/Work Assignments:**  
 Task: Continue to mop up 100 ft. along perimeter.  
 Purpose: Secure the line around the perimeter.  
 End State: Mop up objectives are met and fire remains in the current footprint.

**7. Special Instructions:**  
 Minimize soil disturbance while protecting local habitat.

8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	14	164.7750	110.9	166.2750	110.9	A
TACTICAL	1	151.3100	118.8	151.3100	118.8	A
AIR TO GROUND	7	156.0225	118.8	156.0225	118.8	A

<b>9. Prepared By (Resource Unit Leader)</b> F. KNOWLES	<b>Approved By (Planning Section Chief)</b>	<b>Date</b> 07/07/2020	<b>Time</b> 1710
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**Division/Group Assignment List (ICS 204 WF)**  
 Controlled Unclassified Information//Basic

<b>1. Incident Name:</b>		<b>3.</b>	
SADDLE MOUNTAIN		<b>Branch:</b>	<b>Division/Group:</b>
<b>2. Operational Period:</b> DAY SHIFT		<b>LIMA</b>	
Date/Time From: 07/08/2020 0700 WED	Date/Time To: 07/08/2020 1900 WED		

4. Operations Personnel			
<b>OPERATIONS CHIEF</b>	HATLEY, TOM 509-953-8933	<b>DIVISION/GROUP SUPERVISOR</b>	SEWELL, STEPHEN 509-929-3391
<b>AIR ATTACK SUPERVISOR</b>			

5. Resources Assigned this Period					
Strike Team / Task Force / Resource Designator	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
O-8 TFLD		SCHINNELL, SAMI	1		
C-4 WINEMA IHC	07/20	HESCOCK JR, CHARLES	20		
C-7 HIGHLANDS 20 TYPE 2IA	07/20	SCHERTENLEIB, SETH	20		
C-10 OKANOGAN TYPE 2IA	07/19	GLEASON, DAN	18		
E-17 HI COUNTRY	07/20	BERNETTE, BRIAN	3		
E-18 OSPREY WILDFIRE	07/20	ROE, KEVIN	3		
E-19 METHOW RIVER WILDFIRE	07/20	HERNANDEZ, OZZIE	3		
E-20 LIBERTY WILDFIRE	07/20	WATSON, CEDAR	3		
E-21 MEADOW WILDFIRE	07/20	RAMON, DAMIAN	3		
E-4109			3		
E-4401			3		
E-4504			3		
GRANT COUNTY FD5 DOZER			1		

**6. Control Operations/Work Assignments:**  
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 Purpose: Secure the line around the perimeter.  
 End State: Mop up objectives are met and fire remains in the current footprint.

**7. Special Instructions:**  
 Minimize soil disturbance while protecting local habitat.

8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	6	159.3300	118.8	151.1675	118.8	A
TACTICAL	2	151.3400	118.8	151.3400	118.8	A
AIR TO GROUND	7	156.0225	118.8	156.0225	118.8	A

<b>9. Prepared By (Resource Unit Leader)</b> F. KNOWLES	<b>Approved By (Planning Section Chief)</b>	<b>Date</b> 07/07/2020	<b>Time</b> 0000
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# Division/Group Assignment List (ICS 204 WF)

Controlled Unclassified Information//Basic

<b>1. Incident Name:</b> SADDLE MOUNTAIN		<b>3.</b>	
<b>2. Operational Period:</b> DAY SHIFT		<b>Branch:</b>	<b>Division/Group:</b>
Date/Time From: 07/08/2020 0700 WED	Date/Time To: 07/08/2020 1900 WED	<b>MIKE</b>	

4. Operations Personnel			
<b>OPERATIONS CHIEF</b>	HATLEY, TOM 509-953-8933	<b>DIVISION/GROUP SUPERVISOR</b>	JONES, SETH 509-961-4870
<b>AIR ATTACK SUPERVISOR</b>			

5. Resources Assigned this Period					
Strike Team / Task Force / Resource Designator	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
SMOKE JUMPERS		PHILLIPS	8		
C-9 ENTIAT TYPE 2IA			20		
E-16 C2C WILDFIRE	07/20	MONETTA, ANTHONY	3		
E-12 CHEWACK WILDFIRE	07/20	SUDER, ROSS	3		
E-15 CHEWACK WILDFIRE	07/20	GRAVES, ANDREW	3		
E-14 METHOW RIVER WILDFIRE	07/20	BALTRUSCH, STEVEN	3		
E-13 HI COUNTRY	07/20	THOMAS, TARYN	3		

**6. Control Operations/Work Assignments:**

Task: Continue to mop up 100 ft. along perimeter.  
 Purpose: Secure the line around the perimeter.  
 End State: Mop up objectives are met and fire remains in the current footprint.

**7. Special Instructions:**

Minimize soil disturbance while protecting local habitat.

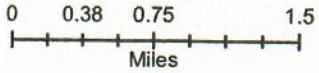
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	6	159.3300	118.8	151.1675	118.8	A
TACTICAL	3	151.3850	118.8	151.3850	118.8	A
AIR TO GROUND	7	156.0225	118.8	156.0225	118.8	A

<b>9. Prepared By (Resource Unit Leader)</b> F. KNOWLES	<b>Approved By (Planning Section Chief)</b>	<b>Date</b> 07/07/2020	<b>Time</b> 0000
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# Saddle Mountain WA-MCR-00291 IAP Map

07/08/2020 Day Shift

Approx: 9,800ac



David Winter  
07 07 20  
1858 Hours

Datum: North American 1983 HARN





**Saddle Mountain  
WA-MCR-00291  
Transportation Map  
07/07/2020  
Approx: 9,800**



David Winter  
07 07 20

Sources: Esri, HERE, Garmin, Intermap, increment P Corp., GEBCO, USGS, FAO, NPS, NRCAN, GeoBase, IGN, Kadaster NL, Ordnance Survey, Esri Japan, METI, Esri China (Hong Kong), Swisstopo, OpenStreetMap contributors, and the U.S. Geological Survey  
Usek Community



<b>SAFETY MESSAGE</b>	1. Incident Name <b>Saddle Mountain</b>	2. Date Prepared <b>7/7/2020</b>	3. Time Prepared <b>2100</b>
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**FIREFIGHTER SAFETY IS FIRST PRIORITY!**

**SAFETY EMPHASIS ON DRIVING**

- ~ Practice "Defensive Driving" techniques. Road to Division A is deep powder making visibiity difficult.
- ~ Honk horn to alert personnel when backing.
- ~ Keep clutter off dash and inside cab.
- ~ Follow Driving LCES (Lights, Chock blocks, Emergency brake, Seat belts.
- ~ Always use headlights.
- ~ Yield to pedestrians and bicycles.
- ~ Observe posted speed limits.
- ~ Use the 3 second rule for following distance when driving.
- ~ Use chock blocks, turn wheels into hill.
- ~ Avoid distractions (eating, cell phones, radio).
- ~ Ensure that windshields are kept clean of dust and bugs.

**REPORT ALL INJURIES, NO MATTER HOW MINOR TO YOUR SUPERVISOR.**

**SAFETY PHONE NUMBERS**

INCIDENT SAFETY OFFICER MIKE HARRIS: 509-572-0064  
SAFETY OFFICER TRAINEE KEN FOSS: 253-318-2678

Bluff Edges or Steep Drop Offs – Before Engaging  
Stay away from bluff edges and drop offs.  
Notify others of hazard location.

**SAFETY PHONE NUMBERS**

INCIDENT SAFETY OFFICER MIKE HARRIS: 509-572-0064  
SAFETY OFFICER TRAINEE KEN FOSS: 253-318-2678

9. Prepared by (Name and Position)

Mike Harris SOFR

<b>INCIDENT RADIO COMMUNICATIONS PLAN</b>		1. Incident Name Saddle Mountain	2. Date/ Time Prepared 7/7/2020 2:00	3. Operational Period Date/Time 7/7/2020 7:00
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**4. Basic Radio Channel Utilization**

Channel	Function	Frequency		Tone	Mode	Assignment	Remarks
		RX:	TX:				
1	TAC 1	RX:	151.3100	118.8	N	DIV A TAC	TACTICAL CHANNEL
		TX:	151.3100	118.8			
2	TAC 2	RX:	151.3400	118.8	N	DIV L TAC	TACTICAL CHANNEL
		TX:	151.3400	118.8			
3	TAC 3	RX:	151.3850	118.8	N	DIV M TAC	TACTICAL CHANNEL
		TX:	151.3850	118.8			
4	TAC 4	RX:	151.3325	118.8	N	DIV Z TAC	TACTICAL CHANNEL
		TX:	151.3325	118.8			
5	CMD 5	RX:	159.4275	118.8	N	EAST SIDE OF FIRE	WAHATIS PEAK
		TX:	151.2725	118.8			
6	CMD 6	RX:	159.3300	118.8	N	WEST SIDE OF FIRE/ICP	SADDLE MOUNTAIN
		TX:	151.1675	118.8			
7	DNR A/G 3	RX:	156.0225	118.8	N	ALL INCIDENT	AIR TO GROUND
		TX:	156.0225	118.8			
8	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
9	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
10	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
11	BLANK	RX:	0.0000	0.0	N	BLANK	BLANK
		TX:	0.0000	0.0			
12	ICP	RX:	151.2125	118.8	N	ICP CHANNEL	TACTICAL CHANNEL
		TX:	151.2125	118.8			
13	REDNET	RX:	153.8300	0.0	N	INTEROP	TACTICAL CHANNEL
		TX:	153.8300	0.0			
14	WAHATIS	RX:	164.7750	110.9	N	EAST SIDE OF FIRE	BACKUP REPEATER
		TX:	166.2750	110.9			
15	ST PRIEST	RX:	159.4200	D723	N	WEST SIDE OF FIRE/ICP	BACKUP REPEATER
		TX:	151.2950	D723			
16	AIRGUARD	RX:	168.6250	110.9	N	ALL INCIDENT	EMERGENCY COMMS WITH AIRCRAFT
		TX:	168.6250	110.9			

5. Prepared by (Communications Unit)  
Chris Pugh (COMT)

**ICS 205** **NFES 1330**

<b>Medical Plan</b> (ICS 206)	<b>1. Incident Name</b> <b>Saddle Mountain</b>	<b>2. Operational Period:</b>	Date From/To: 7/8/2020 Time From/To: 0700-1900
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**3. Medical Aid Stations:**

Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
Mike Schmidtgall	Fireline Medic	541-969-2824	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

**4. Transportation (indicate air or ground):**

Name	Location	Contact Number(s)/Frequency	Level of Service
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
Airlift Northwest (Air)	Seattle, WA	800.426.2430	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
Lifeflight (Air)	Several locations in Eastern WA	800.422.2440	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
AS350 B3, N359TA (Air)	Wenatchee, WA	CWICC 509.884.3473	<input type="checkbox"/> ALS <input checked="" type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS

**5. Hospitals:**

Hospital Name	Address Latitude/Longitude	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
Samaritan Healthcare	801 E. Wheeler Rd, Moses Lake, 47.128164 -119.265462	509.765.5606			<input checked="" type="checkbox"/> Yes Level: 3	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Quincy Valley Medical 901 10th	901 10th Ave S., Quincy, Wa	509.787.3581			<input checked="" type="checkbox"/> Yes Level: 4	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Columbia Basin Hospital	200 Nat Washington Way, Ephrata, Wa	509.754.4631			<input checked="" type="checkbox"/> Yes Level: 4	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Othello Comm Hospital	315 N 14th Ave, Othello, Wa	509.488.2636			<input checked="" type="checkbox"/> Yes Level: 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Kittitas Valley Hospital	603 S Chestnut, Ellensburg, Wa	509.962.9841			<input type="checkbox"/> Yes Level: 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Harborview Medical Cntr	325 9th Ave, Seattle, WA N47 36.1 W121 19.3	206.744.3000 206.744.4074 ER			<input checked="" type="checkbox"/> Yes Level: 1	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**6. Special Medical Emergency Procedures:**

Identify crew EMTs on the line for each Division prior to engaging. In case of urgent situation, notify your supervisor and **follow the MEDICAL INCIDENT REPORT procedure in the IAP**. Notify operations of needs and location on command channel. Operations will notify CWICC and base camp. Minimize radio traffic and maintain situational awareness.

**Overhead**

Check temperatures and conduct self-screening every morning. Document on log sheet at ICP.

**Line Personnel**

Check temperatures and conduct self-screening every morning. Document screening by recording time completed in the REMARKS section of your Crew Time Record (CTR).

Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

<b>7. Prepared by (Medical Unit Leader):</b>	Name: Ryan Scharnhorst	Signature:
<b>8. Approved by (Safety Officer):</b>	Name: Ken Foss SOFR(t)	Signature:

# Fire and COVID-19 Briefing Checklist

## **Self-Awareness / Screening**

- Immediately separate yourself from others.
- Notify supervisor if you or others experience:
  - Cough, more than expected
  - Shortness of breath or difficulty breathing
  - New loss of taste or smell
  - Fever                       Chills
  - Sore throat                 Muscle pain
- Review and follow crew and division plans to isolate, triage, and transport symptomatic personnel.

## **Hygiene on the Fireline**

- Properly wash or sanitize your hands often, especially before and after eating or entering a public place, and after coughing or sneezing.
- Avoid handshakes and communal use items.
- Maintain a supply of hand sanitizer and hand wipes. Inform supervisor of needed resupply.
- Disinfect high touch surfaces often:
  - Radios, phones, doors, pumps, fuel cans, etc.

## **Social Distancing and Protective Equipment**

- Initiate, practice, and remind others of social distancing.
- Conduct briefings and conversations outdoors and at least 6 feet apart.
- Utilize face coverings as a tool when practical.
- Clean or replace dirty face coverings, equipment, and PPE.

## **Communications**

- Face coverings and social distancing complicate communications. Ensure effective sender/receiver messaging.

## **Protect yourself, your crew, and your camp!**

Find more information: <https://www.nwcg.gov/coronavirus>.



# MEDICAL PLAN (ICS 206 WF)

## Medical Incident Report

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

**Use items one through nine to communicate situation to communications/dispatch.**

**1. CONTACT COMMUNICATIONS/DISPATCH**

*Ex: "Communications, Div. Alpha. Stand-by for Priority Medical Incident Report." (If life threatening request designated frequency be cleared for emergency traffic.)*

**2. INCIDENT STATUS: Provide incident summary and command structure.**

Nature of Injury/Illness		<i>Describe the injury (Ex: Broken leg with bleeding)</i>
Incident Name		<i>Geographic Name + "Medical" (Ex: Trout Meadow Medical)</i>
Incident Commander		<i>Name of IC</i>
Patient Care		<i>Name of Care Provider (Ex: EMT Smith)</i>

**3. INITIAL PATIENT ASSESSMENT: Complete this section for each patient. This is only a brief, initial assessment. Provide additional patient info after completing this 9 Line Report.**

Number of Patients:	Male / Female	Age:	Weight:
Conscious? <input type="checkbox"/> YES <input type="checkbox"/> NO = MEDEVAC!			
Breathing? <input type="checkbox"/> YES <input type="checkbox"/> NO = MEDEVAC!			
Mechanism of Injury: <i>What caused the injury?</i>			
Lat/Long (Datum WGS84) <i>Ex: N 40° 42.45' x W 123° 03.24'</i>			

**4. SEVERITY OF EMERGENCY, TRANSPORT PRIORITY**

SEVERITY	TRANSPORT PRIORITY
<input type="checkbox"/> <b>URGENT-RED</b> Life threatening injury or illness. <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2° - 3° burns more than 4 palm sizes, heat stroke, disoriented.</i>	Ambulance or MEDEVAC helicopter. Evacuation need is <b>IMMEDIATE</b> .
<input type="checkbox"/> <b>PRIORITY-YELLOW</b> Serious Injury or illness. <i>Ex: Significant trauma, not able to walk, 2° - 3° burns not more than 1-2 palm sizes.</i>	Ambulance or consider air transport if at remote location. Evacuation may be <b>DELAYED</b> .
<input type="checkbox"/> <b>ROUTINE-GREEN</b> Not a life threatening injury or illness. <i>Ex: Sprains, strains, minor heat-related illness.</i>	Non-Emergency. Evacuation considered <b>Routine of Convenience</b> .

**5. TRANSPORT PLAN:**

**Air Transport:** (Agency Aircraft Preferred)

<input type="checkbox"/> Helispot	<input type="checkbox"/> Short-haul/Hoist	<input type="checkbox"/> Life Flight	<input type="checkbox"/> Other
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**Ground Transport:** Click here to enter text.

<input type="checkbox"/> Self-Extract	<input type="checkbox"/> Carry-Out	<input type="checkbox"/> Ambulance	<input type="checkbox"/> Other
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**6. ADDITIONAL RESOURCE/EQUIPMENT NEEDS:**

<input type="checkbox"/> Paramedic/EMT(s)	<input type="checkbox"/> Crew(s)	<input type="checkbox"/> SKED/Backboard/C-Collar
<input type="checkbox"/> Burn Sheet(s)	<input type="checkbox"/> Oxygen	<input type="checkbox"/> Trauma Bag
<input type="checkbox"/> Medication(s)	<input type="checkbox"/> IV/Fluid(s)	<input type="checkbox"/> Cardiac Monitor/AED
<input type="checkbox"/> Other (i.e. splints, rope rescue, wheeled litter)		

**7. 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					

\*(NAC for digital radio system)

**8. EVACUATION LOCATION:**

Lat/Long (Datum WGS84) <i>EX: N 40 42.45' x W 123 03.24'</i>	
Patient's ETA to Evacuation Location:	
Helispot/Extraction Size and Hazards:	

**9. CONTINGENCY:**

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

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