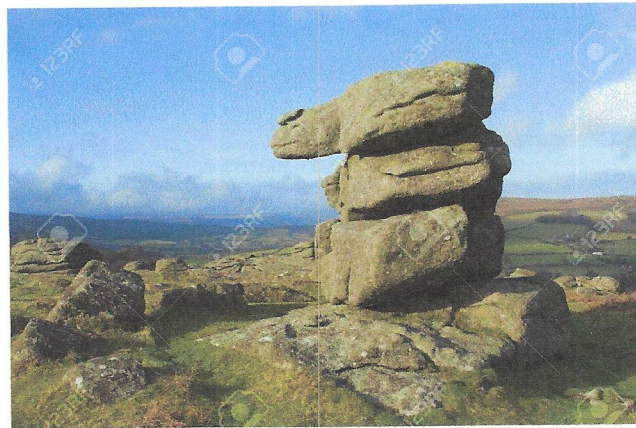


# SEWA Team 1



## Incident Action Plan

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# Batterman Road


# WA-WFS-297

Operation Period: 06:00 – 18:00

July 05, 2021



## INCIDENT OBJECTIVES (ICS 202)

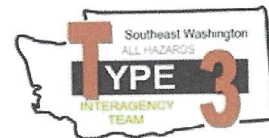
<b>1. Incident Name:</b>	<b>2. Operational Period: DAY</b>	
BATTERMAN_RD	Date/Time From: 07/05/2021 0600      MON	Date/Time To: 07/05/2021 2000      MON
<b>3. Objective(s):</b>		
<p>Provide for the safety of firefighters, public and aviation safety is an absolute necessity while fighting fire aggressively and applying the 10 and 18, LCES and risk management process.</p> <p>Engage and take suppression actions to limit fire acreage growth and protect structures.</p> <p>Establish containment lines to contain the fire East of Batterman Road, West of Rock Island Grade, and South of Beaver Creek.</p> <p>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.</p> <p>Act professionally and in a manner to foster good relationships with public, landowners, cooperators, and agencies. Provide timely and accurate information as it becomes available.</p> <p>Maximize opportunities for cost savings without jeopardizing public or firefighter safety.</p> <p>Maintain awareness of firefighting impact on the landscape, including areas of eco-systems or habitat, minimize and report damage in areas that may be affected and implement tactics accordingly.</p>		
<b>4. Operational Period Command Emphasis:</b>		
<p>Engagement of fire to provide for control must be done with the highest priority on safety based on the terrain and topography being encounter. Throughout the incident perimeter there are significant hazards &amp; employ the best tactics and risk mitigation to achieve the overall strategy of containing the fire.</p> <p>Transition is a watch out, maintain situational awareness, communicate and share information to improve all personnel's awareness of the hazards and opportunities. Plan according, manage your fatigue and maintain awareness of personal health.</p>		
<b>General Situational Awareness:</b>		
<p><b>5. Site Safety Plan Required?</b>      Yes <input type="checkbox"/>      No <input checked="" type="checkbox"/></p> <p><b>Approved Site Safety Plan(s) Located</b></p>		
<b>6. Incident Action Plan</b> (the items checked below are included in this Incident Action Plan):		
<input type="checkbox"/> ICS 202 <input type="checkbox"/> ICS 203 <input type="checkbox"/> ICS 204 <input type="checkbox"/> ICS 205 <input type="checkbox"/> ICS 205A <input type="checkbox"/> ICS 206	<input type="checkbox"/> ICS 207 <input type="checkbox"/> ICS 208 <input type="checkbox"/> ICS 220 <input type="checkbox"/> Map/Chart <input type="checkbox"/> Weather Forecast/Tides/Currents	<b>Other Attachments:</b> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
<b>7. Prepared by:</b> DAVID WINTER	<b>Position/Title:</b> PLANS SECTION CHIEF	<b>Signature:</b> 
<b>8. Approved by Incident Commander:</b>		<b>Signature:</b>
Name:      WALTER ESCOBAR		Date/Time:      07/05/2021 0003
ICS 202	IAP Page	

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b>		<b>2. Operational Period:</b> DAY	
BATTERMAN_RD		Date/Time From: 07/05/2021 0600 MON	Date/Time To: 07/05/2021 2000 MON
<b>3. Incident Commander(s) and Command Staff:</b>		OPS SECTION CHIEF	NICHOLLS, RYAN
IC/UC	ESCOBAR, WALTER	DEPUTY OPS SECTION CHIEF	
DEPUTY		STAGING AREA	
SAFETY OFFICER			
INFORMATION OFFICER	APPELHOF, HEATHER DEBUSSCHERE, GRACE	DIVISION/GROUP	A/L KIEHN, ERIC
LIAISON OFFICER		DIVISION/GROUP	M JONES, SETH
		DIVISION/GROUP	K ELLIS, SETH
		DIVISION/GROUP	G/I CRONK, CHARLIE
		DIVISION/GROUP	NIGHTS MISSAL, SETH
<b>4. Agency/Organization Representative(s):</b>		<b>7b. Air Operations Branch:</b>	
Agency/Organization	Name	AIR OPS BRANCH DIRECTOR	
DOUGLAS CO FIRE #1	JORDAN, DALE	AIR ATTACK SUPERVISOR	
DOUGLAS CO FIRE #2	BRETT, BRIAN	AIR SUPPORT SUPERVISOR	
DOUGLAS CO SHERIFF	GLOSECLOSE, STEVE	HELICOPTER COORDINATOR	
		AIR TANKER COORDINATOR	
<b>5. Planning Section:</b>		<b>8. Finance/Administration Section:</b>	
CHIEF	WINTER, DAVID	CHIEF	MANSFIELD, KELLI
DEPUTY		DEPUTY	
RESOURCES UNIT		TIME UNIT	BRADLEY, SLITA
SITUATION UNIT		PROCUREMENT UNIT	
DOCUMENTATION UNIT		COMPENSATION UNIT	
DEMOBILIZATION UNIT		COST UNIT	
FIRE BEHAVIOR ANALYST			
HUMAN RESOURCE SPECIALIST			
TRAINING SPECIALIST			
GIS SPECIALIST			
TECHNOLOGY SUPPORT SPECIALIST			
INCIDENT METEOROLOGIST			
<b>6. Logistics Section:</b>			
CHIEF	RASMUSSEN, DONN		
DEPUTY			
SUPPLY UNIT			
FACILITIES UNIT			
GROUND SUPPORT UNIT			
COMMUNICATIONS UNIT			
MEDICAL UNIT			
SECURITY UNIT			
FOOD UNIT			
<b>7. Operations Section:</b>			
DAY OPS SECTION CHIEF			
NIGHT OPS SECTION CHIEF			
PLANNING OPS			
<b>9. Prepared By:</b>	<b>Name:</b>	<b>Position/Title:</b>	<b>Signature:</b>
ICS 203	IAP Page	Date/Time:	



## Fire Weather Forecast



**FORECAST NO:** 07052101

**NAME OF FIRE:** Batterman Rd

**PREDICTION FOR:** 07/05/2021

**SIGNED:**

**TIME/DATE ISSUED:** 07/04/2021

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### WEATHER DISCUSSION:

Today will be hot and dry with lighter winds than yesterday.

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### WEATHER FORECAST FOR TODAY:

Sky/weather.....Sunny.

LAL.....1.

Max temperature.....Around 96.

Min humidity.....22 percent.

Wind (20 ft).....Northwest winds 5 to 10 mph, becoming southeast 3 to 6 mph by mid afternoon.

Mixing height.....1000 ft in the morning increasing to 10,000 ft by early afternoon

Transport winds.....West 7 to 12 mph.

Haines Index.....2 to 4 or very low to low potential for large plume dominated fire growth.

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### WEATHER FORECAST FOR TONIGHT:

Sky/weather.....Clear.

LAL.....1.

Min temperature.....Around 67.

Max humidity.....47 percent.

Wind (20 ft).....Northwest winds 4 to 11 mph.

Mixing height.....7000 ft AGL in the evening decreasing to near the surface overnight.

Transport winds.....Northwest around 14 mph.

Haines Index.....4 or low potential for large plume dominated fire growth.

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### OUTLOOK FOR TOMMOROW:

Sky/weather.....Sunny.

Max temperature.....Around 101.

Min humidity.....15 percent.

Wind (20 ft).....Northwest winds 3 to 5 mph in the morning shifting to the southeast in the afternoon.

Mixing height.....0 ft AGL in the morning increasing to 7000 ft AGL in the afternoon.

Transport winds.....Southwest around 5 mph.

Haines Index.....4 or low potential for large plume dominated fire growth.

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### EXTENDED FORECAST:

Temperatures will remain very warm over the Inland Northwest through this week with high temperatures mainly in the 90s. A weather disturbance on Wednesday will bring the potential for thunderstorms followed by breezy afternoon winds. After cooler weather for Thursday, temperatures will warm up for the upcoming weekend.

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

<b>1. Incident Name:</b>		<b>3.</b>				
BATTERMAN_RD		<b>Branch:</b>		<b>Division/Group</b>		
<b>2. Operational Period:</b> DAY				<b>A/L</b>		
Date/Time From: 07/05/2021 0600 MON	Date/Time To: 07/05/2021 2000 MON					
<b>4. Operations Personnel</b>						
<b>OPERATIONS CHIEF</b> NICHOLLS, RYAN		<b>BRANCH DIRECTOR</b>				
<b>DIVISION/GROUP SUPERVISOR</b> KIEHN, ERIC		<b>AIR ATTACK SUPERVISOR</b>				
<b>5. Resources Assigned this Period</b>						
Strike Team / Task Force / Resource Designator	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
NORTHWEST ST						
SOUTHWEST ST #1						
<b>6. Control Operations/Work Assignments:</b>						
Establish and provide structure protection for all structures in the Division.						
Mop up 100 feet around all structures and 50 feet in from the line.						
<b>7. Special Instructions:</b>						
It is going to be hot and dry. Take adequate breaks and drink plenty of liquids.						
<b>8. Division/Group Communication Summary</b>						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	1	151.2125	127.3	151.2125	127.3	
AIR TO GROUND	2	167.4500	0.0	167.4500	0.0	
TACTICAL	3	168.2000	0.0	168.2000	0.0	
TACTICAL	4	151.4150	103.5	151.4150	103.5	
TACTICAL	5	167.5500	0.0	167.5500	0.0	
<b>9. Prepared By (Resource Unit Leader)</b>		<b>Approved By (Planning Section Chief)</b>			<b>Date</b>	<b>Time</b>
DAVID WINTER						

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

<b>1. Incident Name:</b>		<b>3.</b>				
BATTERMAN_RD		<b>Branch:</b>		<b>Division/Group</b>		
<b>2. Operational Period:</b> DAY				<b>G/I</b>		
Date/Time From: 07/05/2021 0600 MON	Date/Time To: 07/05/2021 2000 MON					
<b>4. Operations Personnel</b>						
<b>OPERATIONS CHIEF</b>	NICHOLLS, RYAN		<b>BRANCH DIRECTOR</b>			
<b>DIVISION/GROUP SUPERVISOR</b>	CRONK, CHARLIE		<b>AIR ATTACK SUPERVISOR</b>			
<b>5. Resources Assigned this Period</b>						
Strike Team / Task Force / Resource Designator	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
SOUTH PUDGET ST	07/19					
<b>6. Control Operations/Work Assignments:</b>						
Secure any unsecured line.						
Mop up 100 feet around all structures and 50 feet in from the line.						
<b>7. Special Instructions:</b>						
It is going to be hot and dry. Take adequate breaks and drink plenty of liquids.						
<b>8. Division/Group Communication Summary</b>						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	1	151.2125	127.3	151.2125	127.3	
AIR TO GROUND	2	167.4500	0.0	167.4500	0.0	
TACTICAL	3	168.2000	0.0	168.2000	0.0	
TACTICAL	4	151.4150	103.5	151.4150	103.5	
TACTICAL	5	167.5500	0.0	167.5500	0.0	
<b>9. Prepared By (Resource Unit Leader)</b>		<b>Approved By (Planning Section Chief)</b>		<b>Date</b>	<b>Time</b>	
DAVID WINTER				07/05/2021	0313	

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

1. Incident Name:			3.			
BATTERMAN_RD			Branch:		Division/Group	
2. Operational Period: DAY					<b>K</b>	
Date/Time From: 07/05/2021 0600 MON		Date/Time To: 07/05/2021 2000 MON				
4. Operations Personnel						
OPERATIONS CHIEF		NICHOLLS, RYAN		BRANCH DIRECTOR		
DIVISION/GROUP SUPERVISOR		ELLIS, SETH		AIR ATTACK SUPERVISOR		
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
C-2002 FRANKCO F015 HC2				20		
6. Control Operations/Work Assignments:						
Scout and construct line. Mop up were needed.						
7. Special Instructions:						
It is going to be hot and dry. Take adequate breaks and drink plenty of liquids.						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	1	151.2125	127.3	151.2125	127.3	
AIR TO GROUND	2	167.4500	0.0	167.4500	0.0	
TACTICAL	3	168.2000	0.0	168.2000	0.0	
TACTICAL	4	151.4150	103.5	151.4150	103.5	
TACTICAL	5	167.5500	0.0	167.5500	0.0	
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
DAVID WINTER					07/05/2021	0313

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

<b>1. Incident Name:</b>				<b>3.</b>		
BATTERMAN_RD				<b>Branch:</b>	<b>Division/Group</b>  <b>M</b>	
<b>2. Operational Period:</b> DAY						
Date/Time From: 07/05/2021 0600 MON		Date/Time To: 07/05/2021 2000 MON				
<b>4. Operations Personnel</b>						
<b>OPERATIONS CHIEF</b>		NICHOLLS, RYAN		<b>BRANCH DIRECTOR</b>		
<b>DIVISION/GROUP SUPERVISOR</b>		JONES, SETH		<b>AIR ATTACK SUPERVISOR</b>		
<b>5. Resources Assigned this Period</b>						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
SOUTHWEST ST #2						
C-2000 FRANCO F014 HC2						
C-2001 J. FRANCO HC2						
<b>6. Control Operations/Work Assignments:</b>						
Establish line construction.						
<b>7. Special Instructions:</b>						
It is going to be hot and dry. Take adequate breaks and drink plenty of liquids.						
<b>8. Division/Group Communication Summary</b>						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	1	151.2125	127.3	151.2125	127.3	
AIR TO GROUND	2	167.4500	0.0	167.4500	0.0	
TACTICAL	3	168.2000	0.0	168.2000	0.0	
TACTICAL	4	151.4150	103.5	151.4150	103.5	
TACTICAL	5	167.5500	0.0	167.5500	0.0	
<b>9. Prepared By (Resource Unit Leader)</b>			<b>Approved By (Planning Section Chief)</b>		<b>Date</b>	<b>Time</b>
DAVID WINTER					07/05/2021	0312



SAFETY MESSAGE	1. Incident Name	2. Date Prepared	3. Time Prepared
<p><b><u>COMMUNICATIONS</u></b></p> <ul style="list-style-type: none"> <li>• Establish with IC before engaging the fire.</li> <li>• If Aircraft are in the area establish comms and monitor.</li> <li>• Ensure all personnel receive fire behavior and weather conditions/updates.</li> <li>• Brief all personnel on objectives and any changes in supervisory contacts.</li> <li>• Keep in contact with your crew and supervisor.</li> </ul> <p><b><u>WEATHER &amp; HYDRATION</u></b></p> <ul style="list-style-type: none"> <li>• Review Thunder Storms located on page 21 of the 2014 IRPG.</li> <li>• Hydrate continually throughout the day. 5 parts water to 1 part Gatorade.</li> <li>• During rest periods, continue to eat and hydrate adequately.</li> <li>• Monitor yourself and your crew members throughout the day for symptoms of dehydration.</li> </ul> <p><b><u>TRANSPORTATION</u></b></p> <ul style="list-style-type: none"> <li>• Clean your windshield, headlights and taillights. Drive with lights on.</li> <li>• Drive slower and arrive safely!</li> <li>• WEAR YOUR SEATBELT! . ALWAYS! . PASSENGERS TOO!</li> <li>• Be aware of road hazards, i.e. animals, other vehicles, protruding objects, gravel, and pedestrians while en route to the fire and in/around the local community.</li> <li>• Use spotters when backing.</li> <li>• Park pointed out with wheels chocked.</li> </ul> <p><b><u>STEEP TERRAIN</u></b></p> <ul style="list-style-type: none"> <li>• Work smarter not harder. Take your time working on steep terrain. Have a plan.</li> <li>• Unstable footing. Assure a good work platform to prevent strains and sprains.</li> <li>• Rolling/falling debris. Keep aware of your surroundings.</li> </ul> <p><b><u>HEALTH and CLEANLINESS</u></b></p> <ul style="list-style-type: none"> <li>• Wash hands and face before eating. Use soap and water / sanitizer as available.</li> <li>• Clean and treat small scratches/cuts so they don't get infected.</li> <li>• Take care of your feet. Change socks and treat blisters.</li> </ul>			
9. Prepared by (Name and Position)		Marsh Brown SOFR	

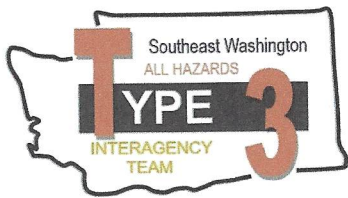
# INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

<b>1. Incident Name:</b> Batterman	<b>2. Date/Time Prepared:</b> Date: 7/4/2021 Time: 15:00	<b>3. Operational Period:</b> Date From: 7/5/2021 Time From: 0600 Date To: 7/5/2021 Time To: 2000
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4. Basic Radio Channel Use:										
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	DNR Badger		151.21 25	127.3	151.21 25	127.3		
		Air to Ground	A/G 40		167.45 00	0.0	167.45 00	0.0		
		Tactical	FS Tac		168.20 00	0.0	168.20 00	0.0		
		Tactical	DNR Common		151.41 50	103.5	151.41 50	103.5		
		Tactical	Wen Tac		167.55 00	0.0	167.55 00	0.0		

**5. Special Instructions:**

<b>6. Prepared by (Communications Unit Leader):</b> Name: Dave Nalle	Signature: _____
ICS 205	IAP Page
Date/Time: 7/4/2021 8:30 PM	



# Finance

***“Employees are paid for actual hours worked, with no guarantee of a maximum shift length, unless otherwise specified in a formal, authorized agreement.”*** –Interagency Incident Business Management Handbook, Chapter 10

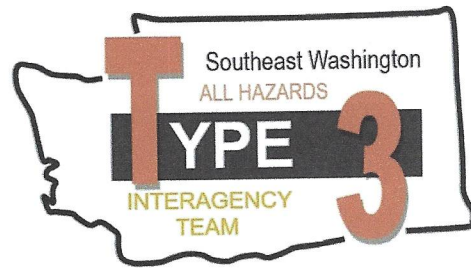
## **\*\*\*Morning\*\*\***

- Only those invited to the Operations meeting may record time before the morning briefing starting time.
- Contract crews and equipment will start time according to terms of their contract.
- Hourly apparatus time starts upon leaving camp.
- Exception time recorded will be justified on the CTR/Shift Ticket.
- Crew/Single Resource 30 minute lunches will be shown OR justified on the CTR.

## **\*\*\*End of Shift\*\*\***

- All Contract Crew time stops when they return to camp.
- Hourly apparatus time stops when they enter camp.
- All other personnel are allowed a reasonable time to do vehicle and tool maintenance, generally no more than 30 minutes.

# Code of Conduct Incident Personnel



Each individual on this incident is responsible for:

- 🔧 Being *ready and able* to perform their assigned duties effectively.
- 🔧 Conducting themselves in a manner that treats people with dignity, equality, courtesy, and respect.
- 🔧 Abiding by agency ethics and conduct regulations.
- 🔧 Reporting any harassment or other inappropriate behavior.

Each individual of this incident has the right to:

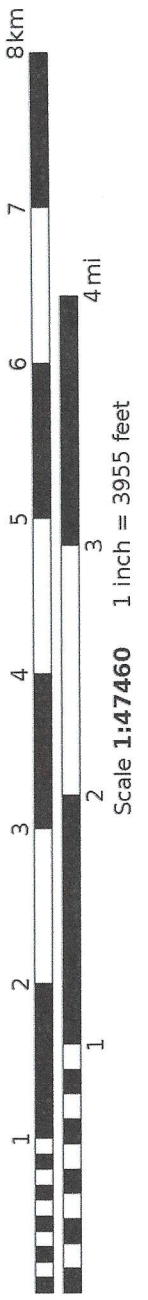
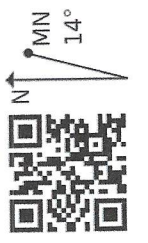
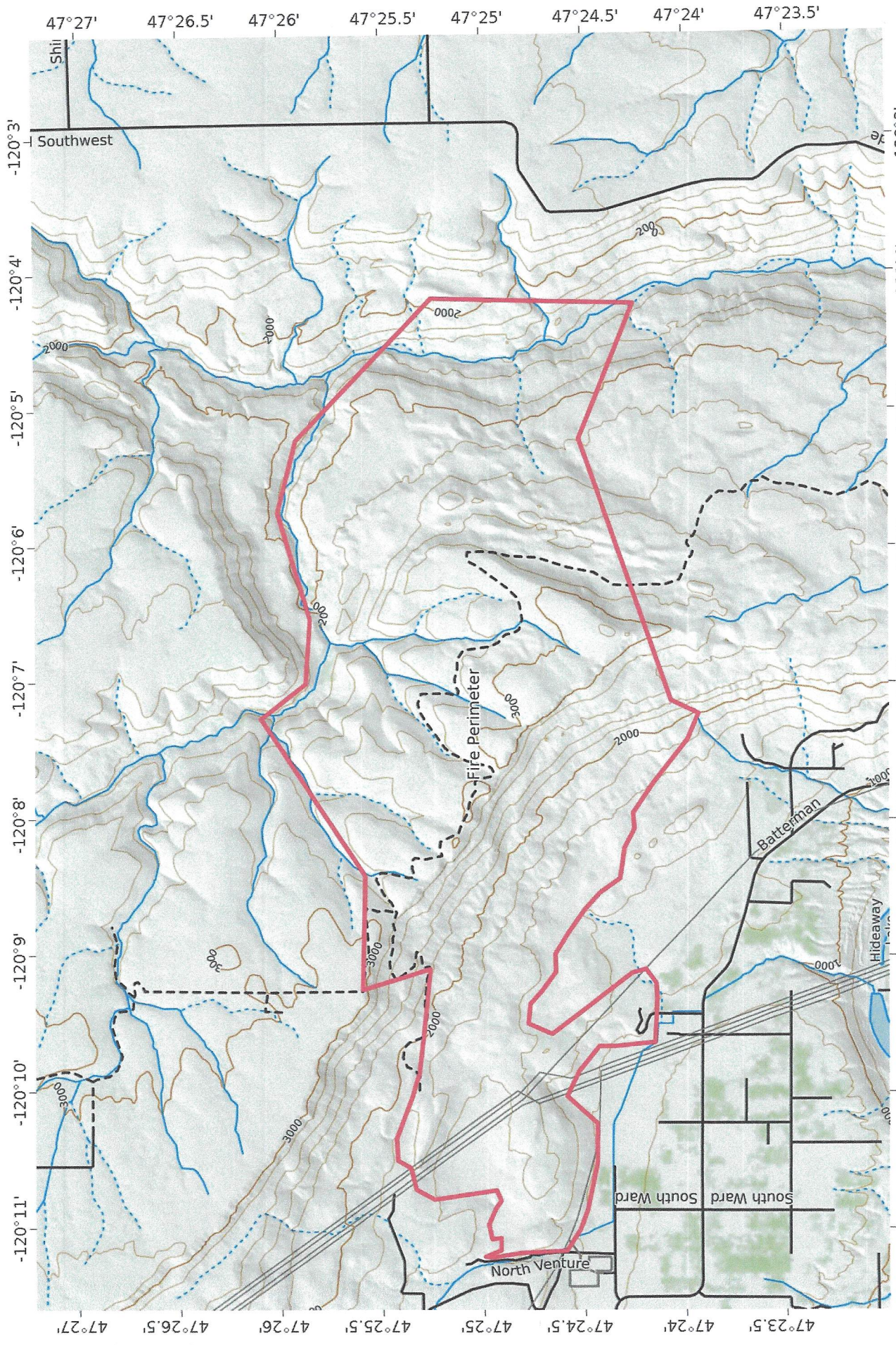
- 🔧 Work in an environment characterized by safe work practices.
- 🔧 Work in a fair and harassment free environment.
- 🔧 Say "No" to unwelcome advances or requests for favors.
- 🔧 File complaints or grievances through appropriate avenues.

There is zero tolerance for inappropriate behavior while assigned to the incident, including:

- 🔧 Illegal drug use
- 🔧 Alcohol use
- 🔧 Unsafe work practices and activities
- 🔧 Discrimination
- 🔧 Sexual harassment
- 🔧 Fighting, threatening, and abusive behaviors
- 🔧 Using social media and electronic communication devices for personal business while engaged in fire assignment duties.
- 🔧 Other violations of Fire Service, Washington DNR, and Federal agency standards of conduct.

Failure to adhere to the Code of Conduct could result in dismissal from the incident, with notification to your home unit.

The public expects our best efforts; they see us as professionals in what we say and do. Let's continue to show them we are!



Batterman Road  
 WGS84  
 USNG Zone 10TGT  


### ACTIVITY LOG (ICS 214)

<b>1. Incident Name:</b>	<b>2. Operational Period:</b> Date From: _____ Time From: _____	Date To: _____ Time To: _____
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<b>3. Name:</b>	<b>4. ICS Position:</b>	<b>5. Home Agency (and Unit):</b>
-----------------	-------------------------	-----------------------------------

6. Resources Assigned:		
Name	ICS Position	Home Agency (and Unit)

7. Activity Log:	
Date/Time	Notable Activities

<b>8. Prepared by:</b> Name: _____	Position/Title: _____	Signature: _____
------------------------------------	-----------------------	------------------

ICS 214, Page 1	Date/Time: _____
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<b>Medical Plan</b> (ICS 206)	<b>1. Incident Name</b>	<b>2. Operational Period:</b>	Date From/To:			
			Time From/To:			
<b>3. Medical Aid Stations:</b>						
<b>Name</b>	<b>Location</b>	<b>Contact Number(s)/Frequency</b>	<b>Paramedics on Site?</b>			
			<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 (indicate air or ground):</b>						
<b>Name</b>	<b>Location</b>	<b>Contact Number(s)/Frequency</b>	<b>Level of Service</b>			
Ballard Ambulance	1028 N Wenatchee, Wenatchee, WA	911/509.663.6513	<input type="checkbox"/> ALS <input type="checkbox"/> BLS			
Lifeline Ambulance - Station1	501 N Wenatchee, Wenatchee, WA	911/509.663.8091	<input type="checkbox"/> ALS <input type="checkbox"/> BLS			
Lifeline Ambulance - Station2	230 Grant Rd, East Wenatchee, WA	911/509.663.8091	<input type="checkbox"/> ALS <input type="checkbox"/> BLS			
Airlift Northwest (Air)	Seattle, WA	800.426.2430	<input type="checkbox"/> ALS <input type="checkbox"/> BLS			
Lifeflight Network (Air)	Several locations in Eastern WA	800.232.0911	<input 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			
<b>5. Hospitals:</b>						
<b>Hospital Name</b>	<b>Address Latitude/Longitude</b>	<b>Contact Number(s)/Frequency</b>	<b>Travel Time Air Ground</b>	<b>Trauma Center</b>	<b>Burn Center</b>	<b>Helipad</b>
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Confluence Health Hospital	1201 S Miller St, Wenatchee, WA N47 24.42 W120 19.26	509.662.1511		<input checked="" type="checkbox"/> Yes Level: 2,3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Confluence Health Center	820 N Chelan Ave, Wenatchee, WA	509.663.8711		<input type="checkbox"/> Yes Level: ____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Lake Chelan Comm Hosp	503 E Highland Ave, Chelan, WA	509.682.3300		<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
Cascade Med Cntr	817 Commercial St, Leavenworth, WA	509.548.5815		<input checked="" type="checkbox"/> Yes Level: 5	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" 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>						
<p>Identify crew EMTs on the line for each Division prior to engaging. In case of urgent situation, notify your supervisor and <b>follow the MEDICAL INCIDENT REPORT "9-line" procedure on pages 108-109 in the 2014 IRPG</b>. Notify operations of needs and location on command channel. Operations will notify CWICC and base camp. Minimize radio traffic and maintain situational awareness.</p> <p><input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.</p>						
<b>7. Prepared by (Medical Unit Leader):</b>			Name:	Signature:		
<b>8. Approved by (Safety Officer):</b>			Name:	Signature:		

# MEDICAL INCIDENT REPORT

(2014 IRPG Pg 108-109)

1. Incident Name

2. Date Prepared

3. Time Prepared

**5. TRANSPORT PLAN:**

**Air Transport:** (Agency Aircraft Preferred)  Life Flight  Other  
 Helispot  Short-haul/Hoist  Life Flight  Other

**Ground Transport:**  
 Self-Extract  Carry-Out  Ambulance  Other

**6. ADDITIONAL RESOURCE/EQUIPMENT NEEDS:**

Paramedic/EMT(s)  Crew(s)  SKED/Backboard/C-Collar  
 Burn Sheet(s)  Oxygen  Trauma Bag  
 Medication(s)  IV/Fluid(s)  Cardiac Monitor/AED  
 Other (e.g., splints, rope rescue, wheeled litter)

**7. COMMUNICATIONS:**

Function	Channel Name/Number	Receive (Rx)	Tone/NAC*	Transmit (Tx)	Tone/NAC*
Ex: Command	Forest Rpt. Ch. 2	168.3250	110.9	171.4325	110.9
COMMAND					
AIR-TO-GRND					
TACTICAL					

\*NAC for digital radio system)

**8. EVACUATION LOCATION:**

Lat./Long. (Datum WGS84)  
 Ex: N 40° 42.45' x W 123° 03.24'

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 ETAs of resources ordered.
- Act according to your level of training.
- Be Alert. Keep Calm. Think Clearly. Act Decisively.

## Medical Incident Report

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**

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

**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. See page 100 for detailed Patient Assessment.**

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

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

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

9. Prepared by (Name and Position)