

INCIDENT ACTION PLAN

NORTH FORK FIRE

Sunday September 4, 2022

0600-2100 Operational Period



PERCENT OF EFFORT

Ground	Daily	Approval
DNR	%	
FS	%	
Air	Daily	Approval
DNR	%	
FS	%	

PERCENT OF OWNERSHIP

Ground	Daily	Approval
DNR	%	
FS	%	
Air	Daily	Approval
DNR	%	
FS	%	



WA-NES-001744

PN P06M (1522)

AGN-221

IAPs & Maps



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: North Fork Fire	2. Operational Period: Date From: 9/4/2022 Time From: 0600	Date To: 9/4/2022 Time To: 2100			
2. Objective(s): <ul style="list-style-type: none"> • Implement risk management practices that provide for the safety of firefighters, other responders, and the public. • Establish fire control lines in areas where there is high probability of success and ensure that firefighter exposure is commensurate with expected benefits. • Minimize acres burned • Keep costs commensurate with values at risk. • Follow agency policies at all times & respect the policies of the host agency. • Maintain positive working relationships with the community, state and federal agencies, private industry, elected officials and other stakeholders. • Provide timely communications and accurate information as it becomes available. 					
4. Operational Period Command Emphasis: Mop up and back haul operations continue in preparation for transition to Type 4 IMT.					
General Situational Awareness Steep uneven terrain, heavy fuels, limited access, and snags					
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 style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input checked="" type="checkbox"/> ICS 203 <input checked="" type="checkbox"/> ICS 204 <input checked="" type="checkbox"/> ICS 205 <input type="checkbox"/> ICS 205A <input checked="" type="checkbox"/> ICS 206 </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ICS 207 <input type="checkbox"/> ICS 208 <input checked="" type="checkbox"/> Map/Chart <input checked="" type="checkbox"/> Weather Forecast/Tides/Currents </td> <td style="width: 33%; vertical-align: top;"> Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ </td> </tr> </table>			<input checked="" type="checkbox"/> ICS 203 <input checked="" type="checkbox"/> ICS 204 <input checked="" type="checkbox"/> ICS 205 <input type="checkbox"/> ICS 205A <input checked="" type="checkbox"/> ICS 206	<input type="checkbox"/> ICS 207 <input type="checkbox"/> ICS 208 <input checked="" type="checkbox"/> Map/Chart <input checked="" type="checkbox"/> Weather Forecast/Tides/Currents	Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
<input checked="" type="checkbox"/> ICS 203 <input checked="" type="checkbox"/> ICS 204 <input checked="" type="checkbox"/> ICS 205 <input type="checkbox"/> ICS 205A <input checked="" type="checkbox"/> ICS 206	<input type="checkbox"/> ICS 207 <input type="checkbox"/> ICS 208 <input checked="" type="checkbox"/> Map/Chart <input checked="" type="checkbox"/> Weather Forecast/Tides/Currents	Other Attachments: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____			
7. Prepared by: Name: <u>Christy Merritt</u> Position/Title: <u>PSCS3</u> Signature: <u><i>Christy Merritt</i></u>					
8. Approved by Incident Commander: Name: <u>Tom Merritt</u> Signature: <u><i>Tom Merritt</i></u>					
ICS 202	IAP Page _____	Date/Time: 09/3/2022 2000			

ORGANIZATION ASSIGNMENT LIST	
1. Incident Name North Fork Fire	
2. Date Prepared 9/3/2022	3. Time 2000
4. Operational Per. SUN 9/4/22 0600 SUN 9/4/2022 2100	

5. Incident Commander and Staff	
Incident Commander	Tom Merritt 509-844-4711
Liaison Officer	
Safety Officer	Brad Martin 509-953-2730
Information Officer	
Human Resources	

6. Agency Representative	
USFS Agency Administrator	Cesar Ramirez 509-690-0166
Washington DNR Agency Administrator	Ken McNamee 509-690-0034
USFS Agency Representative	Jimmy Corvino 509-675-2430
Washington DNR Agency Representative	Steve Harris 509-995-4373

7. Planning Section	
Chief	Bill Coates 509-207-8573
Resource Unit Leader	Christy Merritt 360-708-4788
Demob Unit Leader	
Situation Unit Leader	Jessica Walston 509-690-0114 (virtual)
GIS Specialist	Kat Russell 775-635-5843
Training Specialist	
Fire Behavior Analyst	
Long Term Fire Analyst	
Incident Meteorologist	
Doc. Unit Leader	
Lead READs	

8. Logistics Section	
Chief	Whit Spencer 509-724-3251
Base Camp Manager	Tom Brunke 509-842-2557
Facilities Unit Leader	
Ground Support Unit Leader	
Communications Unit Leader	Todd Bellefeuille
Communications Tech	Jeff Smetzler
Communications Tech	Robert Learning (T)
Radio Operator	
Incident Tech Sup. Specialist	
Security Unit Manager	

9. Operations Section	
Planning Ops.	Jason Gallagher 509-951-6088
Field Ops.	Jake Townsend 509-429-0545 Justin Hughes (T) 509-288-9121
Strategic Ops.	

a.	
Division A	Steve Young 509-429-0167 Shaun Turner (T)
Division	
Division	
Division	
Division	

b.	
Branch Director	
Division	
Division	
Division	

c.	
Branch Director	

d.	
Branch Director	
Division	
Division	


e.	
Branch Director	
Division	
Division	
Division	

f. Air Ops Branch	
Air Ops. Branch Director	
Air Tactical Group Sup.	
Air Support Group Sup.	

10. Finance Section	
Chief	Michelle Leonard 509-640-8716
Personnel Time/ Status Check-In	Pegy Callahan 509-795-9592
Cost Unit Leader	
Procurement Unit Leader	
Comp. Claims Unit Leader	
Contract Project Inspector (ICPI)	

Prepared by (Resource Unit Leader)
Christy Merritt

Division/Group Assignment List (ICS 204 WF)

1. Incident Name:		3.				
North Fork Fire		Branch:	Division/Group:			
2. Operational Period: DAY SHIFT		A				
Date/Time From: 9/4/2022 0600	Date/Time To: 9/4/2022 2100					
4. Operations Personnel						
FIELD OPERATIONS	O-2.5 Jake Townsend 509-429-0545	DIVISION/GROUP SUPERVISOR	O-2.6 Steve Young 509-429-0167 O-17 Shaun Turner (T) (9/5)			
SAFETY OFFICER	O-10 Brad Martin 509-953-2730 (9/4)	AIR OPS BRANCH DIR				
5. Resources Assigned this Period						
Resource Order	Strike Team / Task Force / Resource Name	LWD	Leader	Persons	Pick Up/Drop Off	
O-2.9	TFLD (T)	9/10	Austin Hatten	1	ICP	
C-8	HC2IA North Columbia #41	9/8	Michael Robinson	20	SPIKE CAMP	
C-3	HC2IA Highlands Crew	9/5	Seth Schertenleib	21	SPIKE CAMP	
O-8	HEQB	9/10	Meg Wallmow	1	ICP	
E-11	WTS2 South Pend Oreille #33	9/6	Robert Hanson	1	ICP	
E-21	VUTV Top Gun (six seats)			0	SPIKE CAMP	
E-22	VUTV Top Gun (four seats)			0	SPIKE CAMP	
O-2.18	SOFR	9/6	Mark Knokey	1	ICP	
O-11	EMTF	9/10	Paycen Pettit	1	ICP	
E-23	MEDIC 1**	9/10	Lauren Burton	2	ICP	
				50		
6. Control Operations/Work Assignments:						
<p>Complete mop up where safe to do so. Verify hot spots by palm I.R. Grid for heat and spots. Construct water bars on hand line at a 45-degree angle from the line, per Repair Standards. Remove all pumps, hose, and supplies that will not be needed for the Type 4 organization down to spike by end of shift.</p>						
7. Special Instructions:						
**MEDIC 1 is a UTV with two.						
8. Division/Group Communication Summary						
Function	Channel	RX Freq	RX Tone/NAC	TX Freq	TX Tone/NAC	Mode
PRIMARY CMD	3-CMD 3	SEE COMMUNICATIONS PLAN ICS 205 FOR DETAILS				
SECONDARY CMD	1-CALSPL-C					
TACTICAL	7-TAC 7					
AIR TO GROUND	14- NF A/G					
9. Prepared By (RESL) Christy Merritt		Approved By (Planning Section Chief) 		Date 9/3/2022	Time 2000	

	1. Incident Name	2. Date/Time Prepared:
WEATHER	NORTH FORK FIRE	09/3/2022 1700

Quieter weather is expected into Labor Day although a weak dry cold front Sunday evening will result in gusty winds both Sunday afternoon and into the evening. Slight cooling is expected behind the front into Monday. Significant warming and drying is then likely Tuesday and Wednesday.

SUNDAY . . .

Sky/weather.....Sunny.
 CWR.....0 percent.
 LAL.....1.
 Max temperature....Around 73.
 Min humidity.....26 percent.
 Wind (20 ft).....South winds 6 to 11 mph with gusts to around 18 mph.
 Mixing height.....Near the surface through 0900 PDT increasing to 4000 ft AGL in the afternoon.
 Transport winds.....South around 10 mph in the morning increasing to 10 to 20 mph in the afternoon.
 Haines Index.....4 Low.

SUNDAY NIGHT . . .


Sky/weather.....Partly cloudy. Haze and areas of smoke overnight.
 CWR.....0 percent.
 LAL.....1.
 Min temperature....Around 52.
 Max humidity.....56 percent.
 Wind (20 ft).....Southwest winds 5 to 10 mph with gusts up to 20 mph in the evening shifting to west 4 to 8 mph overnight.
 Mixing height.....Decreasing to near the surface by 2000 PDT.
 Transport winds.....South 5 to 15 mph in the evening then west 5 to 10 mph overnight.
 Haines Index.....4 Low.

MONDAY . . .

Sky/weather.....Sunny. Haze and areas of smoke in the morning.
 CWR.....0 percent.
 LAL.....1.
 Max temperature....Around 69.
 Min humidity.....31 percent.
 Wind (20 ft).....Southwest 3 to 8 mph.
 Mixing height.....Near the surface through 0800 increasing to 6000 ft AGL in the afternoon.
 Transport winds.....West 5 to 10 mph.
 Haines Index.....4 Low.

3. Prepared By (Resource Unit Leader)

Name: Christy Merritt

INCIDENT RADIO COMMUNICATIONS PLAN I-205				1. INCIDENT NAME		2. DATE/TIME PREPARED		3. OPERATIONAL PERIOD DATE/TIME			
				NORTH FORK FIRE		09/03/2022 13:01pm		0600-2100 09/04/2022			
4. BASIC RADIO CHANNEL UTILIZATION											
Ch #	Function	Channel Name	Assignment	RX Freq	N/W	RX Tone/NAC	TX Freq	N/W	TX Tone/NAC	Mode Analog (A) Digital (D) Mixed (M)	Remarks
1	COMMAND	CALSPL-C	SECONDARY	172.3750	N	146.2	165.7500	N	103.5	A	DNR CALSPL-C
2	COMMAND	COLVILLE		159.4350	N	156.7	151.1600	N	156.7	A	DNR COLVILLE
3	COMMAND	CMD 3	PRIMARY	151.5125	N	186.2	158.4075	N	186.2	A	NORTH FORK COMMAND
4	COMMAND	CMD 4		154.5275	N	186.2	158.4000	N	186.2	A	
5	TAC	FS TAC		168.2000	N	0.0	168.2000	N	146.2	A	FS TAC
6	TAC	DNR TAC 2		151.3400	N	103.5	151.3400	N	103.5	A	DNR TAC 2
7	TAC	TAC 7	DIV A	151.7600	N	186.2	151.7600	N	186.2	A	DIVISION A
8	TAC	TAC 8	ROADS	151.7000	N	186.2	151.7000	N	186.2	A	ROADS GROUP
9	TAC	REDNET		153.8300	N	0.0	153.8300	N	156.7	A	REDNET
10											
11											
12											
13											
14	A/G	NF A/G	A/G	166.6000	N		166.6000	N		A	PRIMARY A/G
15	MEDEVAC A/G	VMED 28	MED A/G	155.3400	N		155.3400	N	156.7	A	AIR AMBULANCE / LIFEFLIGHT
16	AIRGUARD	AIRGUARD	EMERGENCY	168.6250	N	0.0	168.6250	N	110.9	A	EMERGENCY / SO AIR 3
5. Special Instructions:											
6. I-205 Prepared By: Communications Unit Leader						Name: Jeff Smetzler INCM(T)		Signature: 			



Incident:
North Fork Fire

Date:
Sunday September 4, 2022

Shift:
Day 0600-2100



SAFETY MESSAGE

SAFETY IS OUR FIRST PRIORITY

Fire fighter safety comes first on every fire, every time



Lookouts Communications Escape Routes Safety Zones

SAFETY THOUGHT

Are you getting adequate rest

MAJOR HAZARDS AND RISKS

- | | |
|---|---|
| <ul style="list-style-type: none">• Watch for public traffic. "Headlights on".• Bears have been seen on the fire.• Snags are still out there. | <ul style="list-style-type: none">• Make sure you are rested when traveling home.• Review the health checklist in the IAP. |
|---|---|

- Keep your head up and maintain your working distance. Don't get in a hurry.
- Follow good hygiene practices. Utilize hand wash stations and safe distancing.
- Locate extraction sites and notify your supervisor if you have an injury.
- Slick ground when mopping up.

You will have a line medic on the fire. Identify ahead of time if you have any other EMT's

Line Safety Officer

Mark Knokey

Safety Officer

Brad Martin

9/03/2022

MEDICAL PLAN (ICS 206)

1. Incident Name: North Fork Fire	2. Operational Period: Date From: 09/04/2022 Time From: 0600	Date To: 09/04/2022 Time To: 2100
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3. Medical Aid Stations:

Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
None			<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

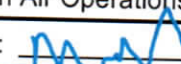
4. Transportation (indicate air or ground):

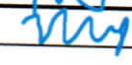
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service
Stevens County Ambulance	Colville, WA (ground)	911 509-684-8261	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
Life Flight	Sandpoint (35 min flight time) Spokane (45 min)	800-232-0911	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
Airlift NW	Davenport, WA (44 min flight time)	206-521-1599	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
Spokane County Rescue 3 (hoist)	Spokane WA (45 min flight time)	509-532-8900	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS

5. Hospitals:

Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
Mt. Carmel Hospital	982 E Columbia Ave Colville 48.5408167,-117.8915361	509-685-5120	10	35	<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Sacred Heart Medical Center	105 W. 8th Spokane, WA 47.6491278,-117.4130778	509-474-3600	45	120	<input checked="" type="checkbox"/> Yes Level: 2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Harborview Medical Center	325 9th Ave. Seattle WA 47.6028139,-122.3246833	206-744-3074	150	6 Hours	<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
					<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

6. Special Medical Emergency Procedures:
 Due to remoteness, anticipate flying any serious injuries.
 Follow medical incident report, in case of medical.
 Identify crew EMT's on your division, prior to engaging.
 H1 coordinates: Long. 48 42'52.5" latitude 117 46' 53.58"
 H2 coordinates Long. 48 41'56.76" Latitude 117 44'35.52"
 Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

7. Prepared by (Medical Unit Leader): Name: Mark Knokey Signature: 

8. Approved by (Safety Officer): Name: Brad Martin Signature: 

ICS 206 IAP Page _____ Date/Time: 09/03/2022 1800

NE WA IMT #1 Overhead Team Roster

North Fork Fire as of 9/3/2022

INCIDENT COMMANDER	Tom Merritt	(509) 844-4711
Safety Officer	Brad Martin	(509) 953-2730
PLANNING SECTION		
Planning Chief	Bill Coates	(509) 207-8573
SITL	Jessica Walston	(509) 690-0114
GISS	Kat Russell	(775) 635-5843
LOGISTICS SECTION		
Base Camp Manager	Whit Spencer	(509) 724-3251
	Tom Brunke	(509) 842-2557
OPERATIONS SECTION		
Planning Ops	Jason Gallagher	(509) 951-6088
Field Ops	Jake Townsend	(509) 429-0545
Field Ops (t)	Justin Hughes	(509) 288-9121
Division	Steve Young	(509) 429-0167
FINANCE SECTION		
Finance Chief	Michelle Leonard	(509) 640-8716
PTRC/SCKN	Pegy Callahan	(509) 795-9592
Communications		
COML	Todd Bellefeuille	(509) 991-9769
Trailer		(509) 389-2002
Agency Administrator		
USFS	Cesar Rameriez	(509) 690-0166
DNR	Ken McNamee	(509) 690-0034
Agency Representative		
DNR	Steve Harris	(509) 995-4373
Dispatch		
Logistics		(509) 685-6900

SUPPRESSION REPAIR STANDARDS –DNR Protected Lands

All Tractor and Hand Lines

- Place water bars on tractor and hand lines with the following spacing guidelines:
 - 6-9% slope - maximum of 300' apart
 - 10-15% slope - maximum of 200' apart
 - 15-25% slope – maximum of 100' apart
 - 25% to 45% slope – maximum of 50' apart
 - Greater than 45% slope – every 25-50'
- **Spacing distances above should only be used as a guide. Use judgment in locating water bars to minimize soil erosion potential.
- Pull soil, litter, duff and debris removed from the fire line back onto the line to cover non fire perimeter hand lines.
- Flatten large berms on all fire lines.
- Leave all freshly fallen trees as they lay. Do not limb or buck.
- Fire lines through damp or wet areas/riparian zones need to be rehabbed by hand if possible, or by the lightest equipment possible, with the least number of stream crossings. If damage is minimal, consider the possibility of not doing additional work.
- Disperse large concentrations of unburned fuels created during suppression efforts

Tractor Lines

- **Tractor lines on slopes less than 40%:**
 - Water bars may be installed by tractor or track mounted excavator. Use of excavator is preferred where berms need to be pulled in. Pile smaller debris and slash at the outlet of water bars.
 - Use only D-6 class or smaller tractors, 6-way blade preferred
 - Install tractor or excavator water bars at a 20 to 30-degree angle to the fire line
 - Height of bars on machines constructed water bars not to exceed 24".
 - Rip areas of compacted soil.
- **Tractor lines on slopes greater than 40%**
 - Install water bars by hand or with an excavator
 - Install water bars at a 30 to 45-degree angle to the fire line.

Hand Lines

- Height of hand constructed water bars should average 12 inches. In light soils, water bars should be at least 12 inches high. In heavier soils, bar heights of 8-12" are acceptable.
- For hand line rehab, construct water bars at a 45-degree angle from the line, directing water away from the fire or other parts of the fire line if possible.

Trees and Felling Operations

- Leave all freshly fallen trees as they lay. Do not limb or buck.
- Avoid cutting trees and snags >20" dbh. Do not cut or damage any green non-hazardous trees anywhere within the fire area unless the tree has been specifically marked for felling by the rehab team.

General Repair Concerns

- Identify and inventory fences, signs, and other improvements damaged by the incident
- Repair road damage incurred during incident suppression. This includes road drainage features such as rolling dips and water bars.
- Remove garbage, litter, etc, from control lines, roads, drop points, and staging areas and dispose off-site.
- Signs/flagging removal: All signs and flagging will be removed from fire lines, roads, drop points, staging areas, camps, and water chances.

SUPPRESSION REPAIR STANDARDS- Colville National Forest

All standards may be supplemented or modified with specification from the AA or their designee.

General Actions

All suppression features, including but not limited to the following, would be marked by GPS and GIS files given to the home unit.

- constructed fire lines (hand)
- water sources
- other disturbed areas

Leave flagging in place which marks hazards, resource concerns, etc.

Remove all garbage associated with fire suppression efforts (pallets, boxes, lunch wrappers, hose bands, unneeded signs, etc.) from the fire area, staging areas, and travel routes. Human waste will be buried.

Streams & Water Sources

All drainages (intermittent and perennial), meadows, and springs – remove all soil, slash, and other debris that has been pushed into these areas. Streams should match natural upstream and downstream conditions.

All water drafting sites (streams and lakes) – return area to pre-fire condition.

Handline

- Angle drainage into green when possible.
- Remove berms.
- Remove any brush/slash from stream channel(s) that was placed there during the fire.
- Water bars not greater than 45° angle, and placed every 25'-50' with 6" berm max.
- Ensure end of water bar is open and clear of obstructions.

RO #	Name	Type	Demob Date	Demob Time
O-5	Christy Merritt	RESL	4-Sep	1600
O-10	Brad Martin	SOF2	4-Sep	1800
O-27	Scott Doughty	EMTP	4-Sep	1815
RO #	Name	Type	Demob Date	Demob Time
C-3	Seth Schertenleib DNR Highlands	CR2I	5-Sep	1400
O-17	Shaun Turner	TFLD	5-Sep	1400
O-2.3	Jason Gallagher	OPS3	5-Sep	1800
RO #	Name	Type	Demob Date	Demob Time
E-23	ATV	ATV	6-Sep	0715
E-11	Robert Hanson SPO #33	WTS2	6-Sep	0715
E-15	Comms Trailer	COMM	6-Sep	0730
O-18	Paul Kapfer	CAMP Help	6-Sep	0800
O-19	Riley Walker	CAMP	6-Sep	0830

NORTHEAST WA IMT #1

REQUIRED BY ALL PERSONNEL: HEALTH CHECKLIST

Supervisors are required to go over this list each morning with assigned resources.

Self-Awareness / Screening. How are you doing?

- Fever or chills
- Cough
- Shortness of breath difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- Camp Crud (not feeling well)
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Rash/Blisters
- Itchy/Scratchy
- Diarrhea

Supervisors if you have a member not feeling well/sick or symptomatic: Safety Officer.

✓ Review expectations on maintaining a healthy environment:

- Masks are optional, unless otherwise directed.
- Modules (e.g. crews, engines) should send representatives to pick up meals, attend briefings and any other needs for the entire group: 1 person for engine crews, 1-2 people for 20 person crews.
- Observe 6-foot social distancing during briefings and while standing in line for meals, and any other time you are near people outside of your module.
- Limit closed contact between firefighters as much as possible, use crew representatives to pick up supplies, fuel, etc.
- Keep clean sanitized hands
- Maintain clean and sanitized workspace/eating/sleeping areas.

WEAR YOUR MASK IF DIRECTED
WASH YOUR HANDS
WATCH YOUR DISTANCE

ACTIVITY LOG (ICS 214)

1. Incident Name:	2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____
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3. Name:	4. ICS Position:	5. Home Agency (and Unit):
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6. Resources Assigned:		
Name	ICS Position	Home Agency (and Unit)

7. Activity Log:	
Date/Time	Notable Activities

8. Prepared by: Name: _____	Position/Title: _____	Signature: _____
ICS 214, Page 1	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"/> RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2^o - 3^o burns more than 4 palm sizes, heat stroke, disoriented.</i> <input type="checkbox"/> YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary. <i>Ex: Significant trauma, unable to walk, 2^o - 3^o burns not more than 1-3 palm sizes.</i> <input type="checkbox"/> GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport <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 & 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, Extraction

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.

