# **PINE GULCH FIRE**

CO-GRD-000307 — PDNCQ5 (1502) [P]

# MONDAY, SEPTEMBER 21, 2020

Day Operational Period 0700-2100



# **UPPER COLORADO RIVER IMT3**

JEREMY SPETTER
DUSTIN WHEELER, ICT3(T)

**IAP** 



https://tinyurl.com/y5kqqmrz

https://ftp.nifc.gov/public/incident specific data/rocky mtn/2020/PineGulch/

Fire Information: (970) 628-5622 2020.pinegulch@firenet.gov Media Line: (970) 628-5622

		INCIDENT OF	3JECTIV	/ES (ICS 202)		
1. Incident Name:		2. Operation	al Period:	DAY		
PINE GULCH		Date/Tir	me From:		Date/Time To:	
		09/21/20	020 0700	MON	09/21/2020 2100	MON
2. Follow CD 3. Curtail adv the community of power transmiss 4. Implement 5. Coordinate 6. Maintain a 7. Ensure inc 8. Support in	or firefighter and public sand cas well as local, state, verse impacts to residence of De Beque and surrounsion lines, oil & gas infrast a full suppression strate with affected partners to and develop relationships cident cost is commensuratial attack for local fire unit suppression repair plants	and agency specifices, commercial proding area, private la tructure, sensitive sigy utilizing a variety on ensure timely and with adjacent agenate with the values nit.	ic guidance perties, a and and raspecies, raspecies, raspecies, raspecies accurate accurates, staffs,	e to prevent COVII and critical commun anches, BLM infras ange infrastructure, s to limit fire size ar distribution of infor	D-19 spread. ity infrastructure. Value tructure, cultural and h and recreation infrast and achieve containmen mation to the public.	es at risk include istoric sites, ructure. t.
4. Operational Per	iod Command Emphasis:					
2. Patrol exis	re with Resource Advisors sting control lines.  nly to the extent necessar	-	-			
					ti	
and practicing of further instruction Maintain situation	onal awareness. Ensure	t the first sign of co	ough or flu	like symptoms, iso	late yourself and call n	
5. Site Safety Plan Approved Site Saf	Required? Yes Tety Plan(s) Located at:	No X				
6. Incident Action		low are included in this	Incident Act	ion Plan):		
X ICS 202 X ICS 203 X ICS 204 X ICS 205 ICS 205A X ICS 206	☐ ICS 207 ☐ ICS 208 ☐ ICS 220 ☐ Map/Chart ☑ Weather Forecas	st/Tides/Currents		Attachments: INANCE INSTRUCTI	ONS	
	REBECCA ROLLER cident Commander:	Name: DUSTIN W	SC3 (T) HEELER	Si	gnature: Mann J	
ICS 202		IAP Page		Da	ate/Time: 09/20/2020 190	J

FINAL

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# **ORGANIZATION ASSIGNMENT LIST (ICS 203)**

1. Incident Name:		2.0	Operational	Period: I	DAY				
PINE GULCH			Date/Time				e/Time To:		
			09/21/202		MON	09/21	/2020 2100	MON	
3. Incident Comm	nander	(s) and Command Staff:			DEPUTY OPS SECTION CHIEF				
	IC/UC	JEREMY SPETTER DUSTIN WHEELER (1	Γ)		STAGING AREA				
DE	PUTY	·	,						
SAFETY OFF	FICER	MATTHEW RINGER			DIVISION/GROUP			HILIP QUIGLEY	
INFORMA	ATION	ERIC COULTER			DIVISION/GROUP	EAST	PH	HILIP QUIGLEY	
LIAISON OFF	FICER				7b. Air Operations Bran				
		Representative(s):			AIR OPS BRANCH DIRECTOR				
Agency/Organiza		Name			AIR ATTACK				
Agency/Organiza		GREG WOLFGANG (A	ΛΛDM): C(	OLLIN	SUPERVISOR AIR SUPPORT				
	DLIVI	EWING (AREP)	AADIVI), C	OLLIN	SUPERVISOR				
		WAYNE WERKMEIST	ER (AREF	P)	HELICOPTER				
GARFIELD CO		CHRIS BORHOLDT (A	AREP)	•	COORDINATOR AIR TANKER				
	S.O.	CHAD WHITING			COORDINATOR				
MESA COUNT	Y S.O.	ANDY MARTSOLF (A	REP)		8. Finance/Administrati				
5. Planning Section							NEY MURF	RAY	
		STAN MITCHEM				LORI VE	:0		
DE	PUTY	REBECCA ROLLER (			TIME UNIT				
RESOURCES	UNIT	MARIAH WIESKE-OR	MSBY (T)		PROCUREMENT UNIT				
SITUATION		****			COMPENSATION UNIT				
DOCUMENTA	ATION TINU				COST UNIT				
DEMOBILIZATION									
FIRE BEHA									
HUMAN RESO	LIBCE			GAMES IN CO.					
SPECI.									
TRAINING SPECI	ALIST								
GIS SPECI	ALIST								
TECHNO SUPPORT SPECI									
	IDENT								
6. Logistics Secti									
		LARRY OVERBYE							
		JOEL HENDRICKSON	١						
DE	PUTY								
GROUND SUP									
MEDICAL	UNIT								
SECURITY									
FOOD									
7. Operations Sec									
DAY OPS SEC		ANDREW WHITE			9				
NIGHT OPS SEC	CHIEF								
(	CHIEF								
OPS SECTION (									
DEPUTY OPS SEC	CTION CHIEF	8							
		: MARIAH WIESKE-ORMSE	зү	Position/Title	e: RESL (T)		nature:		
ICS 203	IAP P	age		Date/Time:	09/20/2020 1900	1	find U	Inl Ond	

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#### Pine Gulch Fire Weather Forecast



**FORECAST NO: 44** 

PREDICTION FOR: Monday September 21th, 2020

**UNIT: BLM- GJT** 

FORECAST ISSUED: 1604 MDT Sep 20th,

2020 SIGNED: Rebecca Roller PSC3 (T)

#### **WEATHER DISCUSSION:**

Dry southwest flow will be in place for Monday with occasional breezy conditions. A weak disturbance will move in Tuesday from the southwest, allowing for the next best chance for shower and storm activity. Chance of wetting rain is low.

#### **WEATHER FORECAST**

#### .MONDAY...

Sky/weather.......Sunny (0-10%).

Max temperature.....82-87 F.

Min humidity.......13-18%.

Wind (20 ft).......Downslope/downvalley 3 to 6 mph until 1000, then becoming upslope/upvalley (southwest at ridgetops) 8 to 12 mph with gusts to around 20 mph in the afternoon.

Haines Index.......6 or high.

LAL............1.

CWR.............0%.

#### .MONDAY NIGHT...

Sky/weather......Mostly clear (10-20%).

Min temperature.....57-62 F.

Max humidity......36-41%.

Wind (20 ft)......Southwest 5 to 10 mph in the early evening, becoming downslope/downvalley 3 to 6 mph after sunset.

Haines Index.......6 or high.

LAL.........1.

CWR.........0%.

#### .TUESDAY...

**Sky/weather**.......Mostly sunny (20-30%) then becoming partly cloudy (30-40%). Scattered showers and isolated thunderstorms in the afternoon.

Max temperature.....79-84 F. Min humidity......20-25%.

Wind (20 ft).......Downslope/downvalley 3 to 6 mph until 1000, then becoming upslope/upvalley (southwest at ridgetops) 8 to 12 mph with gusts to around 20 mph in the afternoon. Gusty and erratic winds expected near thunderstorms in the afternoon.

Haines Index......4 or low.
LAL......1 until 1200, then 2.
CWR......6%.

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

1. Incident Name:		3.									
PINE GULCH						Bran	ch:	T	Division/Group	o:	
2. Operational Period:	DAY										
Date/Time From:			Date/Time To:						WEST		
09/21/2020 0700 N	ION	0	)9/21/2020 210	0 N	ION						
4.				Operations	Personn	el					
OPERATIONS CHI	<b>EF</b> ANDRE	W WHIT	E			S	SAFETY OF	FICER	MATT RINGER		
DIVISION/GROUP SUPERVISO	OR PHILIP	QUIGLE	Υ			LINI			JEFF FRIMEL		
							COORDIN	ATOR			
LINE SAFE	TY JUSTIN	PHIPPE	EN								
5.			Resou	ırces Assigr	ed this	Period					
Strike Team / Task				<u> </u>			Number	Ι			
Resource Desig	nator		LWD		Leader		Persons	l	Off PT./Time		ck Up PT./Time
O-704 TFLD (T)			09/23	RICK JONE			1	DP 25/			5/2100
TFLD(T)			09/25	JACOB PO			1	DP 25/0700 DP 25/2100 DP 25/2100			
O-710 HEQB			09/24	HALE REDDING		1					
` '			TIM SPURF			1	DP 25/			5/2100	
O-720.4 HEQB(T) 09/25			09/25	CASEY HO			1	DP 25/			5/2100
O-720 WFM2 SKYWAY 09/25 BRIA			BRIAN THE			7	DP 25/	0700	DP 25	5/2100	
E-211 ENG6 MESA 126 09/22 DEAI			DEAN DICA	AMILLO		3	DP 25/			5/2100	
E-377 DOZ3 RM SOUTHERLAND 09/27 RANDY SO			RANDY SC	UTHERL	AND			DP 25	5/2100		
E-201 DOZ2 SOUTHWEST EC	QUIP TRANS	3	09/21	MARK ALG	ER	2 DP 25/0700		DP 25	5/2100		
E-378 EXCA AJ EXCAVATOR			09/30	LOGAN JA	MES	2 DP 25/0700		0700	DP 25	5/2100	
E-380 GOLDEN CREST TYPE	1 EXCA		09/24	MARK TUCKER			2 DP 25/0700		0700	DP 25	5/2100
O-521 REAF			09/23	DAVID LOV	VE		1	DP 25/0700		DP 25/2100	
O-453 READ				MIKE JONE	S		1 DP 25/0700		0700	DP 25	5/2100
O-733 REAF			09/29	PAUL SEVI	ER		1	DP 25/	0700	DP 25	5/2100
LOWER VALLEY AMBULANCE			09/30				2	DP 25/	0700	DP 25	5/2100
6. Control Operations/Work A	ssignments	:					L			<u> </u>	
Task: Continue suppress								ity plar	٦.		
Purpose: Suppression d End State: Repair control					on natu	ıraı res	ources.				
8.				/Group Com	municat	ion Sum	ımarv				
Function	Channe	. I	RX Frequency	i	RX Tone		TX Freque	acy N/M	TX Tone/NA	$\overline{}$	Mode
TACTICAL	12	'	172.58750		NON		163.38	-	110.9	+	A
TACTICAL	14		168.3500N		NON		168.350		NONE	+	A
COMMAND	3		172.1125N	<u> </u>	156.		163.07		151.4	+	A
COMMAND	6		172.1125N		156.	7	163.07	50N	127.3		А
COMMAND	7		172.1125N		156.	7	172.11	25N	156.7		Α
9. Prepared By (Resource Uni	t Leader)		Approv	ved By (Plar	ning Se	ction Ch	nief)	С	ate	T	ime

STAN MITCHEM

1900

09/20/2020

MARIAH WIESKE-ORMSBY (T)

# Division/Group Assignment List (ICS 204 WF)

		Controlled Uncla	ssified In	formation)//Basic	•			
1. Incident Name:				3.				
PINE GULCH				Branch:	Division/Group:			
2. Operational Period:	DAY							
Date/Time From: 09/21/2020 0700 MON	I	Date/Time To: 09/21/2020 2100	MON		WEST			
4. Operations Personnel								
OPERATIONS CHIEF	ANDRE	W WHITE		SAFETY OFFICER	MATT RINGER			
DIVISION/GROUP SUPERVISOR	PHILIP	QUIGLEY		LINE SAFETY/COVID COORDINATOR				
LINE SAFETY	JUSTIN	PHIPPEN						
6. Control Operations/Work Assi	gnments	:	,		'			
7. Special Instructions:								

- Work on umbrella area to H13 for any additional repair work
- Continue work on Old Douglas Pass Road
- Stage Lower Valley ambulance at division discretion
- Perform radio checks before engaging in work
- Work with READs on priorities and needs
- Gas and oil pipelines outside current closure area are active now. Pay close attention performing rehab and repair activities around or near pipelines.
  - Tactical channel 12 is primary. Tactical channel 14 is secondary.

8.		Division/Grou	p Communication Sur	mmary		
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	/ TX Tone/NAC	Mode
TACTICAL	12	172.58750	NONE	163.38750	110.9	A
TACTICAL	14	168.3500N	NONE	168.3500N	NONE	А
COMMAND	3	172.1125N	156.7	163.0750N	151.4	A
COMMAND	6	172.1125N	156.7	163.0750N	127.3	A
COMMAND	7	172.1125N	156.7	172.1125N	156.7	A
9. Prepared By (Resource U	nit Leader)	Approved By	Approved By (Planning Section Chief)			Time
MARIAH WIESKE-ORMSBY	STAN MIT	STAN MITCHEM			1900	

# Division/Group Assignment List (ICS 204 WF)

	Controlled	Unclassific	ed Infor	mation//	Basic	····,	
1. Incident Name:				3.			
PINE GULCH				Branc	h:	Division/Grou	ıp:
2. Operational Period: DA	·Υ						
Date/Time From:	Date/Time To					EAST	
09/21/2020 0700 MON	09/21/2020 21	00 M	ION				
4.		Operations I	Personne	el		·	
OPERATIONS CHIEF AND	DREW WHITE		DIVISIO	N/GROU	P SUPERV	PHILIP QUIGLE	(
SAFETY OFFICER MAT	TT RINGER				SAFETY/C	OVID JEFF FRIMEL	
LINE SAFETY JUS	TIN PHIPPEN			POIN	T OF CON	TACT MOLLY SEIM	
5.	Reso	urces Assign	ed this F	Period			
Strike Team / Task Force / Resource Designator	LWD		Leader		Number Persons	Drop Off PT./Time	Pick Up PT./Time
E-369 ENG6 KY-LBF	09/22	DOUG PHE	LPS		4	DP 20/0700	DP 20/2100
ENG4 E2411*	09/24	MOLLY SE	IM		4	DP 20/0700	DP 20/2100
E631		PADILLA			4	DP 20/0700	DP 20/2100
READ		ANJELICA	SPENCE	R	1	DP 20/0700	DP 20/2100
O-145 READ		MARLIN DE	RAS		1	DP 20/0700	DP 20/2100
6 Control Operations/Work Assignment	nto:				1		

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

Task: Continue suppression damage repair as identified in the suppression repair priority plan.

Purpose: Suppression damage does not leave lasting impacts on natural resources.

End State: Repair control features to near natural conditions.

#### 7. Special Instructions:

- Maintain public presence on the Division.
- Clean up any last suppression repair work on the division.
- Gas and oil pipelines outside current closure DP 30 to 31 area are active now. Pay close attention performing rehab and repair activities around or near pipelines.
  - \*E2411 and E631 available for local IA.

8.		Division/Group	Communication Sun	nmary					
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode			
TACTICAL	15	169.2875N	NONE	169.2875N	NONE	А			
COMMAND	1	172.1125N	NONE	163.0750N	173.8	А			
COMMAND	6	172.1125N	156.7	163.0750N	127.3	А			
9. Prepared By (Resource Ur	nit Leader)	Approved By	/ (Planning Section Cl	nief) D	ate	Time			
MARIAH WIESKE-ORMSBY (	STAN MITO	CHEM	О	9/20/2020	1900				

# INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205) Controlled Unclassified Information//Basic

				50000000			2000				Г
1. Incident Name:	lame:		2. Da	2. Date/Time Prepared:		3. Ope	3. Operational Period:	DAY			
PINE GULCH	딩.		Date:	9: 09/20/2020			Date/Time From:		Da	<u>.</u>	
			Time:	9: 1900		Ö	09/21/2020 0700	MOM	2/60	09/21/2020 2100 MON	
4. Basic Radio Channel Use:	lio Chan	inel Use:									
Zone Group	Ð#	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq	RX Tone/NAC	TX Freq	TX Tone/NAC	Mode (A,D, or M)	Remarks	
-	1	COMMAND	LANDS END	EAST	172.1125N	NONE	163.0750N	173.8	A		
-	2	COMMAND	GATEWAY	Ι	172.1125N	156.7	163,0750N	186.2	A		Г
-	3	COMMAND	DOUGLAS PASS	WEST	172.1125N	156.7	163.0750N	151.4	A		
-	4	COMMAND	RABBIT VALLEY	ΥI	172.1125N	156.7	163.0750N	123.0	A		
-	5	COMMAND	MESA POINT	ΥI	172.1125N	131.8	163.0750N	131.8	A		Г
-	9	COMMAND	WEST PORTABLE	WEST	172.1125N	156.7	163.0750N	127.3	A		
-	7	COMMAND	BLACK RIDGE	WEST	172.1125N	156.7	172.1125N	156.7	A		
-	8	AIR TO GROUND	A/G 49	ΥI	168.0375N	NONE	168.0375N	NONE	A		
-	6	AIR TO GROUND	A/G 9	ΥI	166.9125N	NONE	166.9125N	NONE	∢		
-	12	TACTICAL	SOA	WEST	172.58750	NONE	163.38750	110.9	A		
-	13	TACTICAL	VFIRE 21	<u>A</u>	154.2800N	NONE	154.2800N	156.7	A	MUTUAL AID	
-	14	TACTICAL	LD WORK	<u>A</u>	168.3500N	NONE	168.3500N	NONE	¥	LD WORK CHANNEL	
-	15	TACTICAL	FIRE TAC 7	EAST	169.2875N	NONE	169.2875N	NONE	¥		
-	16	AIR GUARD	AIR GUARD	AIR GUARD	168.6250N	NONE	168.6250N	110.9	¥	FOR EMERGENCY USE ONLY	
5. Special Instructions:	nstructio	ns:									
6. Prepared By	By	(Communicat	(Communications Unit Leader)	Name: JOEL HENDRICKSON LSC3	RICKSON LSC3		65	Signature:	100°		
ICS 205				IAP Page				Date/Time: 09/	09/20/2020 1900		
				Controlle	Controlled Unclassified Information//Basic	nformation//Ba	sic			Page 1 of 1	

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Incident/Project Name			1	1. Operational Period						
F	Pine G	ulch		Date/Time September 21, 2020 D: 0700-2100						
2. Ambulance Services										
Name		Complete Add	dress		Phone		Advar	ıced Life Sι Yes	pport (ALS) No	
DeBeque Fire Protection Dis	trict 4	580 US Hwy 6, DeBeque, C	O, 81630		911		Υ	ES		
Lower Valley Fire & EMS	1	68 N. Mesa Street, Fruita, (	CO, 81521		911		Y	ES		
3. Air Ambulance Services										
Name		Phone			Туре о	f Aircraft	& Capab	ility		
Care Flight, Rifle		911			A-S	tar, 1 Pat	ient, NVC	}		
Classic Air, Glenwood S	prings	1-800-444-9223	3		Bell	429, 1 Pa	tient, NV	G		
Life Guard 2, Frisc	0	1-800-332-3123	3		A-S	itar, 1 Pat	ient, NVC	3		
4. Hospitals										
		D° MM.MMM' N - Lat ° MM.MMM' W - Long	Trave Air	Time Gnd	Phone	0.00	ipad No		el of Care acility	
St. Mary's Hospital	Lat:	N 39° 5.638	20			**		Leve	II Trauma	
2635 North 7 <sup>th</sup> Street Grand Junction, CO. 81501	Long: VHF:	W -108° 33.745	mins	mins	970-298-1290					
Community Hospital	Lat:	N 39° 6.321	n/a	90	970-664-3100		<b>P</b>	Level	III Trauma	
2351 G Road Grand Junction, CO, 81505	Long:	W -108° 36.901		mins						
University of Colorado	Lat:	N 39° 44.515	120	4	720-848-8400	<b>½</b>			urn Center 8	
12605 East 16 <sup>th</sup> Street Aurora, CO, 80045	Long: VHF:	W -104° 50.469	mins	hrs				Trauma Center		
5. Division   Branch   Group		Area Location Capability	/							
East		Call 911								
West LOWER VALLEY AMBU				LANCE						

IWI IC Responsibilities:

- Take charge of the scene inform the Division Supervisor and Communications that you are the IWI
   IC and establish radio communications (frequencies, channels). Identify the emergency name (Ex. Division A medical, Fish Meadows medical, Highway 21 accident.)
- Assign or begin patient assessment Medical Incident Report (MIR) and first aid. Request additional medical resources on division/branch or across incident. Transmit MIR patient information toCommunications.
- Determine patient transportation through consultation with line medical personnel and Medical Unit Leader. Consider transportation time, risk to personnel, destination facility and available operational resources. If air transport is chosen, implement the plan for alternative transportation in the event aircraft cannot complete the mission. Order transportation resources through Communications as early as
- Notify Communications as resources arrive and any patient status changes. Names of injured or deceased individuals will not be transmitted on the radio.
- Initiate documentation for future investigation; if a line safety officer 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.

6. Prepared By (Medical Unit Leader)	7. Date/Time	8. Reviewed By (SafetyOfficer)	9. Date/Time
MMM hily	9/20/2020	Mother long	9/20/2020



**Daily COVID-19 Reminder** 

- It is mandatory to communicate your daily COVID self-check to your supervisor
- Crews and Engines may make one submission if all personnel in crew or on engine answer NO to all questions and have a temperature less than 100. Please enter ONE temperature on the form. Self-monitor all day and if you have any symptoms, call medical and isolate until further directed.
- If you cannot socially distance, please wear your masks while you are inside a building on the incident. If you are outside and not socially distanced, please wear your mask.
- Check with your home unit and state as soon as possible to make sure you know what is expected of you before your return. There are free COVID tests Tuesday- Saturday 0800-1500 at the Mesa County Fairgrounds/grandstands.
- Questions please contact:

COVID Coordinator at 970-644-0747



- Scan the QR code (on following page) or use the link to register for your COVID-19 test (ignore any request for insurance information, the test is free).
- A family unit/pod/module/crew that has traveled together can travel to the test site with masks on in the same vehicle.
- The test site is located at the fairgrounds and is inside the grandstands.
- The test site is open Tuesdays-Saturdays from 0800 to 1500.



#### **Before Your Test**

#### **REGISTER FOR YOUR TEST** (Choose A or B)

Account # 12928

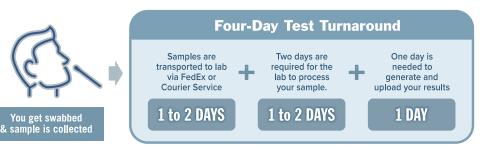


PRE-REGISTER (NOTE: This option is encouraged to REDUCE wait time.) Step 1: Visit https://tinyurl.com/gjcoff-12928. Or scan this QR code with your smartphone. **Step 2:** Complete the registration form. **Note:** Double check the spelling of your name and your date of birth. This information must be exactly correct to receive your results. Step 3: Upon completing the form you will receive an email with your registration number beginning with MX. Show this number to the site attendant in order to proceed with your test.



**REGISTER-ON-SITE** (NOTE: This option will **INCREASE** your wait time.) Step 1: Provide a copy of your ID with Name, Date of Birth, and address to the site attendant. Additional information including phone number, email, etc. will be required. **Step 2:** The site attendant will complete the registration site form on-site.

#### **After Your Test**





If you have not received your test results within four days of collection, please call MAKO.

**NOTE:** Please do not call the lab unless four full days have passed.

#### **How to Access Your Results**

Results available after four days.

Text: "MAKO" to 66349

or visit https://mako.luminatehealth.com

If you have problems accessing your results, for fastest service please submit a support ticket via the website: https://mako.luminatehealth.com/common/signup Results will be available after FOUR DAYS.



#### Antes de su prueba

#### **REGÍSTRESE PARA SU PRUEBA** (Elija A o B)

Cuenta N.° 12928



REGISTRO PREVIO (NOTA: Se recomienda esta opción para REDUCIR el tiempo de espera.) Paso 1: Visite https://tinyurl.com/gjcoff-12928.

O escanee este código QR con su teléfono celular. Paso 2: Complete su formulario de registro. Nota: Revise dos veces la ortografía de su nombre y su fecha de nacimiento. Esta información debe ser exacta y correcta para que reciba sus resultados. Paso 3: Tras completar el formulario, recibirá un correo electrónico con su número de registroque comienza con MX. Muestre este número al asistente del lugar para continuar con su prueba.



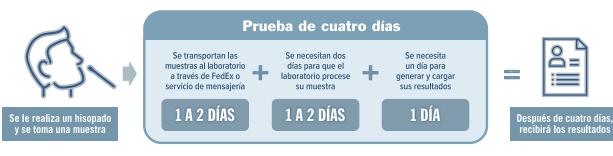


REGISTRO EN LÍNEA (NOTA: Esta opción AUMENTARÁ su tiempo de espera.)

Paso 1: Proporcione una copia de su identificación con nombre, fecha de nacimiento y dirección al asistente del lugar. *Se le solicitará* información adicional, incluido su número de teléfono, correo electrónico, etc.

Paso 2: El asistente del lugar completará el formulario de registro en el lugar.

# Después de su prueba



Si no recibió los resultados de la prueba en los cuatro días posteriores a la toma, llame a MAKO.

NOTA: No llame al laboratorio a menos que hayan pasado cuatro días completos.

#### Cómo acceder a sus resultados

Resultados disponibles después de cuatro días.

Envíe por mensaje de texto: "MAKO" al 66349 o visite https://mako.luminatehealth.com

Si tiene problemas para acceder a sus resultados, para un servicio más rápido, genere un recibo de soporte a través de la página web: https://mako.luminatehealth.com/common/signup

Los resultados estarán disponibles después de CUATRO DÍAS.

# WILDLAND FIRE COVID-19 SCREENING TOOL

Today or in the past 24 hours, have you had any of the following symptoms<sup>1</sup>?

# Cough more than expected? Shortness of breath or difficulty breathing? Fever? Chills? Muscle pain outside your normal for firefighting? Sore throat? New loss of taste or smell?

#### **Instructions for Screening**

Item	What to Do
If resource has a cough that is more than expected, shortness of breath or difficulty breathing, or any other symptoms listed.	DO NOT MOBILIZE
At Entries:	DO NOT ANNOUNCE
Consider adequate number of personnel needed for screening. Although medical personnel are ideal, screeners do not have to be medically trained.	Ask individual to step aside and follow the steps below.
If resource has cough, shortness of breath or difficulty breathing, or any other listed symptoms including fever (over 100.4) at entry.	

Steps to follow	
Escort symptomatic individual to isolation area.	
Isolation support personnel should begin documentation.	
Have symptomatic individual contact Supervisor for further direction	
Notify public health officials.	
Have individual transported as appropriate.	
Protect and secure any collected Personal Identifiable Information (P Health Information (PHI).	II) or Personal

<sup>\*</sup> Take temperature with no-touch thermometer, if available \*  $\,$ 

<sup>&</sup>lt;sup>1</sup> Symptoms of Coronavirus https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html



#### HEALTH AND SAFETY MESSAGE

**INCIDENT:** Pine Gulch Fire DATE: September 21, 2020

Major Hazards & Risks: Heavy Equipment Operations, Driving, Communications issues,

Working on slopes, COVID

#### Effects of Fatigue on Cognitive Function-Part 1

#### #1 – A lack of sleep reduces the capacity of our brains' neurons to communicate effectively.

Studies have shown that performance and vigilance after being awake for 17-19 hours tend to be equal or worse to the performance of individuals with an alcohol concentration of 0.05% in their blood (i.e. the drunk driving limit in Europe).

#### #2 - A lack of quality sleep reduces the effectiveness of the 'process safety part of the brain."

When being in a state of high fatigue, the brain tends to switch to a more energy efficient way of processing information. As a result, it is inclined to switch from a conscious, analytical, rational, reflective and thoughtful – prefrontal cortex mode – of reasoning, to a more energy efficient way of processing information that produces automatic, pre-conscious, reactive, habitual and emotion based actions.

#### #3 - Fatigue and lack of sleep may lead to risk-taking.

The prefrontal cortex, as explained above, also plays a crucial role in inhibiting certain behavioral impulsive acts and regions of the brain. Most sleep and fatigue research support the hypothesis that sleep deprivation increases many aspects of risk-taking, including simple impairments in attention and judgment, greater willingness to accept risk, and a tendency to focus on short-term rather than long-term consequences. These fatigue-related consequences have serious impacts on performance and process safety.

**Cumulative Fatigue:** Cumulative fatigue is fatigue brought on by repeated mild sleep restriction or extended hours awake across a series of days (FAA).



Accident with cumulative fatigue as a root cause

Safety Officers: Matthew Ringer, Jeffrey Frimel, Justin Phippin

#### **UPPER COLORADO RIVER IMT3 TEAM FINANCE**

Email: 2020.pinegulch.finance@firenet.gov

Time Reporting – Crew Time Reports and Equipment Shift Tickets

SUBMIT ALL DOCUMENTATION ELECTRONICALLY TO FINANCE:

1. Use QR code below to automatically create email to be sent directly to Finance



2. As an alternative to using the QR code, you can also send emails of photos, scans or pdf files of CTR and Equipment Shift Tickets to email: <a href="mailto:2020.pinegulch.finance@firenet.gov">2020.pinegulch.finance@firenet.gov</a> with Resource Order number and \*TIME\* on Subject line

#### Tips:

- When emailing documentation to Finance, always include your <u>Resource Order number</u> on the Subject line.
- Include the word \*TIME\* (including the asterisks) in the subject line is required to helpour Finance staff better organize and manage your paperwork
  - Example: SUBJ: O-9999 \*TIME\*
- When sending pictures or scans, be sure the signature portion is included
- Remember your Finance 100 training:
  - Write legibly
  - Include Resource Order #
  - Add total work hours (this reminds your supervisor to provide additional documentation as needed)
  - Ensure all signatures are on documents before emailing to Finance
- Contractors who would like an <u>interim payment</u> submitted for processing can email\_ <u>2020.pinegulch.finance@firenet.gov</u> and include your name and phone number so we may contact you for additional information

#### **REMOTE FINANCE DEMOB**

REMEMBER: All documentation must be submitted electronically to finance, and last CTR should include cell phone number and email address.

2020.pinegulch.finance@firenet.gov Courtney Murray: (970) 712-9755

Subject: reference your Resource Order number, name and Demob.

#### Tips:

- At least 48 hours prior to your scheduled demob date, submit any missing CTRs and/or STs and let Finance know the date you will be demobing.
- When your final work time has been signed by your supervisor, submit with start travel time or travel CTR/ST to Finance with request for draft final OF-288.
- Time recorder will email a draft for your review.
- Please be patient with Finance during the Demob process. You may travel without your travel documents or you can wait until the final is ready. However, you will not be compensated for waiting to receive your final pay documents.



Please scan this QR code to initiate your Finance Demob request.

Finance Section Chief: Courtney Murray (970) 712-9755

# **Demob Information**

#### Pine Gulch Fire CO-GRD-000307

After being notified by your supervisor of your tentative release date, stop by Loma ICP:

- **Step 1.** Return all supplies, radios, etc. that were checked out.
- Step 2. Complete final vehicle inspection
- Step 3. Stop by Planning Section to be placed in pending demob status
- **Step 4.** Submit final time documents electronically to Finance using the QR code below.



Remember to provide a valid email address. Finance staff will post your time, let you review a draft, and send your final time documents to you, all electronically.

<u>Step 5</u>. All vehicles that have been on the fireline must go through the weed wash (at Horizon Drive Car Wash, 691 Horizon Dr., Grand Junction). Code for weed wash: <u>14770</u>

#### **WEED WASH**

•	Horizon Drive Car Wash	•	Weed wash code:
	691 Horizon Drive		14770
	Grand Junction, CO 81506		<del>14770</del>
	·		

#### Pine Gulch Repair Standards

#### **Hand Lines:**

- 1. Obliterate any berms.
- 2. Construct water bars at roughly 30 to 45-degree angles perpendicular to hand line
- 3. Water bar spacing:
  - < 15 percent slope (degrees) space at roughly 100 ft. apart
  - 15-30% slope space at roughly 50 ft. apart
  - > 30 percent slope space at roughly 25 ft. apart.
- 4. Hand line water bars should be 6-8" deep.
- 5. Adequately drain water bars away from line.

#### **Heavy Equipment Lines:**

- 1. Coordinate reclamation work with READ
- 2. Re-establish natural grade and remove berms
- 3. Construct water bars at roughly 30 to 45-degree angles perpendicular to dozer line to facilitate drainage
- 4. Construct water bars a minimum of 12" deep with 18"-24" berm
- 5. Down slope end of water bars is open and has adequate length to prevent runoff from reentering the control line.
- 6. Locate and construct water bars based on site specific conditions
- 7. Pull trees, rocks and other debris to sit perpendicular to slope across dozer line, where feasible
- 8. Remove and place line construction debris from stream channels to prevent soil movement into water resources.
- 9. Reinforce water bars with native materials where necessary.

#### **Recreational Trails and Routes:**

- 1. Where used as hand line, rehabilitate the trail/route tread to the original width as recommended by the READ.
- 2. When appropriate camouflage fire lines with rocks, limbs and other natural debris over a natural sightline distance from hand line crossing.
- 3. Remove hazards (e.g., snags/limbs, flush cut stumps and unstable rocks or logs) from along recreational trails (and recreation sites) if and when conditions allow.
- 4. Scatter excess accumulations of cut limbs and logs in natural patterns (irregular) along recreational routes.

#### **Roads:**

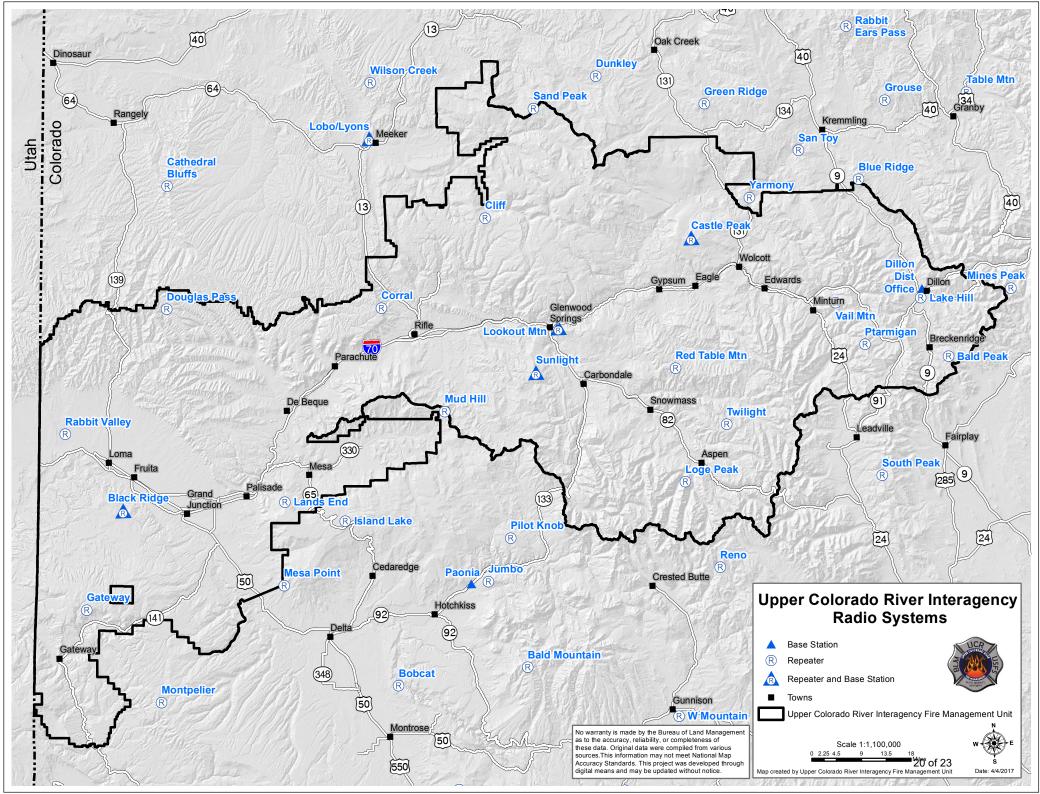
#### Conduct the following work in yellow to retain site specific knowledge from Division crews.

- 1. Repair (or blade) any roads, culverts, or drainage structures, and ditch lines that have been impacted by suppression activities.
- 2. Remove suppression debris 50 feet from ditch lines and culvert inlets.

Repair and restore drainage crossings where suppression activities have impact possible flow.

#### **Stream crossing/ Riparian**

- 1. Drafting and dip sites will be rehabilitated to natural conditions
- 2. Stream and drainage crossing will have natural flow patterns restored



# **ACTIVITY LOG (ICS 214)**

1. Incident Name:			2. Operational Period: Date From	m: Date To:	
			Time Fro	m: Time To:	
3. Name:			S Position:	5. Home Agency (and Unit):	
6. Resources Assi	gned:				
Nar	ne		ICS Position	Home Agency (and Unit)	
7. Activity Log:	<del>,</del>				
Date/Time	Notable Activities				
8. Prepared by: Na	ame:		Position/Title:_	Signature:	
ICS 214, Page 1			Date/Time:	- <del></del>	

**ACTIVITY LOG (ICS 214)** 

1. Incident Name:		2. Operational Period		Date To:	
			Time From:	Time To:	
3. Name:		4. ICS Position:	4. ICS Position: 5. Home Agency		
6. Resources Assi	gned:		•		
Nar		ICS Position	Ho	Home Agency (and Unit)	
7. Activity Log:			1		
Date/Time	Notable Activities				
8. Prepared by: Na	ame:	Position/Title:	Siana	ature:	
ICS 214, Page 1		Date/Time:			

#### 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	□RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE  Ex: Unconscious, difficulty breathing, bleeding severely, 2° – 3° burns more than 4 palm sizes, heat stroke, disoriented.  □YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary.  Ex: Significant trauma, unable to walk, 2° – 3° burns not more than 1-3 palm sizes.  □GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport  Ex: Sprains, strains, minor heat-related illness.				
Nature of Injury or Illness & Mechanism of Injury	Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)				
Transport Request	Air Ambulance / Short Haul/Hoist Ground Ambulance / Other				
Patient Location	Descriptive Location & Lat. / Long. (WGS84)				
Incident Name	Geographic Name + "Medical" (Ex: Trout Meadow Medical)				
On-Scene Incident Commander	Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)				
Patient Care	Name of Care Provider (Ex: EMT Smith)				
3. INITIAL PATIENT ASSESSMENT: Complete this section for each patient as applicable (start with the most severe patient)  Patient Assessment: See IRPG PAGE 106					

Treatment:

#### 4. TRANSPORT PLAN:

Evacuation Location (if different): (Descriptive Location (drop point, intersection, etc.) or Lat. / Long.) Patient's ETA to Evacuation Location:

Helispot / Extraction Site Size and Hazards:

#### 5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS:

Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication

6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable							
Function	Channel Name/Number	Receive (RX)	Tone/NAC *	Transmit (TX)	Tone/NAC *		
COMMAND							
AIR-TO-GRND							
TACTICAL							

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

8. ADDITIONAL INFORMATION: Updates/Changes, etc.

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