

Incident Action Plan

Tuesday, November 23rd, 2021

TL Fall Branch Fire / TL Duck Nest Fire

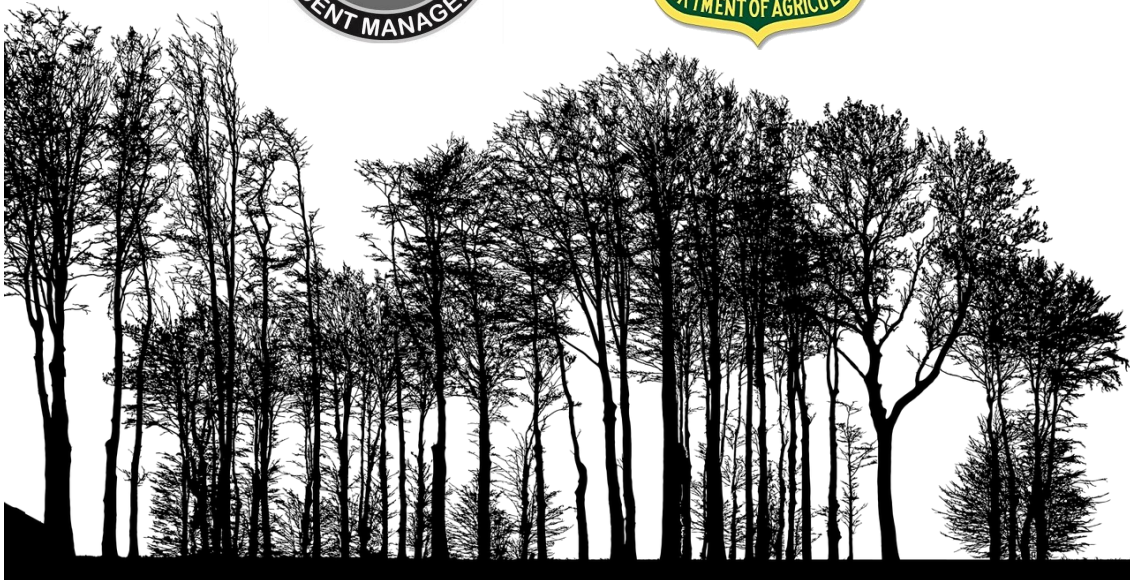
AL-ALF-210220 / AL-ALF-210222

P8 PC7A (0801) / P8 PC7P (0801)

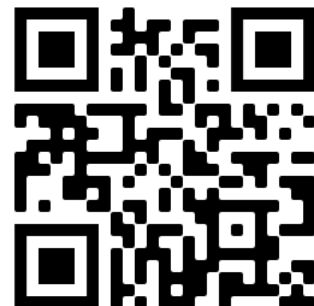
Send all TIME to either:

2021.TLFallBranch.finance@firenet.gov

2021.TLDuckNest.finance@firenet.gov



Maps/ IAP



Check In Code

**Need Information about the
TL Fall Branch Fire
or TL Duck Nest Fire?**

Please call

334.315.4926 or

334.235.5494 or 334.300.4752

Contact us via email: pa_alabama@fs.fed.us

Check us out on Facebook!

<https://www.facebook.com/NFinAlabama>

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:	2. Operational Period:	
TL FALL BRANCH / TL DUCK NEST	Date/Time From: 11/23/2021 0700 TUE	Date/Time To: 11/23/2021 1900 TUE
3. Objective(s):		
<ul style="list-style-type: none"> • Provide for the safety of firefighters and the public through the utilization of strategic and deliberate risk assessment processes. Ensure incident within an incident (IWI) protocols are established. • Develop and implement strategies and tactics with the highest probability of success to <ul style="list-style-type: none"> ○ Minimize long term impact to the Cheaha State Park. ○ Protect identified values at risk around Duck Nest Fire. ○ Minimize the fire footprint and prevent fire from entering the Cheaha Wilderness. • Develop and implement strategies and tactics with the highest probability of success to protect identified values at risk around Duck Nest Fire. • Maintain and enhance relationships through timely communication, actively engaging the Agency Administrators, the public, and stakeholders. • Treat each other with dignity and respect and act in a professional manner on the fire and in the community. • Manage the incident following established COVID-19 mitigation guidelines limiting spread of infectious diseases. 		
4. Operational Period Command Emphasis:		
Conduct operations to achieve incident objectives.		
General Situational Awareness:		
TL Fall Branch: Clear. Max Temp 54°F. Min RH 26%. Chance of Wetting Rain 0%. 20ft Winds N at 5mph in AM, becoming light and variable in PM. Mixing height 3,000ft. Transport Winds N at 8mph. LAL 1. Stability Class D.		
TL Duck Nest: Clear. Max Temp 52°F. Min RH 28%. Chance of Wetting Rain 0%. 20ft Winds N at 5mph in AM, becoming light and variable in PM. Mixing height 2,900ft. Transport Winds N at 10mph. LAL 1. Stability Class D.		
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Approved Site Safety Plan(s) Located		
6. Incident Action Plan (the items checked below are included in this Incident Action Plan):		
<input checked="" type="checkbox"/> ICS 202 <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 type="checkbox"/> ICS 220 <input type="checkbox"/> Map/Chart <input type="checkbox"/> Weather Forecast/Tides/Currents	Other Attachments: <input checked="" type="checkbox"/> PUBLIC INFORMATION CONTACT - p2 <input checked="" type="checkbox"/> COVID MESSAGE & SCREENING TOOL - p9-10 <input checked="" type="checkbox"/> FINANCE MESSAGE - p11 <input type="checkbox"/> _____
7. Prepared by: SETH D HUDSON Position/Title: PSC	Signature: <i>Seth D Hudson</i>	
8. Approved by Incident Commander:	Name: FULTON JEANSONNE	Signature: <i>Fulton Jeansonne</i>
ICS 202	IAP Page	Date/Time: 11/22/2021 2000

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period:	
TL FALL BRANCH / TL DUCK NEST		Date/Time From: 11/23/2021 0700 TUE	Date/Time To: 11/23/2021 1900 TUE
3. Incident Commander(s) and Command Staff:		8. Finance/Administration Section:	
IC/UC	FULTON JEANSONNE 409.926.6766 AARON RADFORD 334.832.8986 (T)	CHIEF	LORI HISEK 501.617.8382 KELLY DONALDSON 580.236.9339 (V)
SAFETY OFFICER	MICHAEL HURD 334.343.1624	DEPUTY	
INFORMATION OFFICER	TAMMY FREEMAN BROWN 334.315.4926 SHEILA HOLIFIELD 334.235.5494	TIME UNIT	
LIAISON OFFICER		PROCUREMENT UNIT	
4. Agency/Organization Representative(s):		COMPENSATION UNIT	
Agency/Organization	Name	COST UNIT	
TALLADEGA NF AADM	JEFF GARDNER		
TALLADEGA DIST RANGER	LINWOOD BUTLER		
TALLADEGA ZONE FMO	BLAKE MORRIS		
5. Planning Section:			
CHIEF	SETH D HUDSON 979.213.3453 CHARLIE RUCKER 540.613.7791 (V)		
RESOURCES UNIT			
SITUATION UNIT			
TECHNOLOGY SUPPORT / GIS SPECIALIST	TRAVIS CLAPP 361.500.5918		
6. Logistics Section:			
CHIEF	JASON MCHAN 865.223.4415		
EQUIPMENT MANAGER	RANDY PREVETTE 423.430.3991		
7. Operations Section:			
OPS SECTION CHIEF	BROCK CAMPBELL 859.556.5065		
STAGING AREA			
DIVISION/GROUP	FALL BRANCH	CHARLIE GRAY 706.473.2190	
DIVISION/GROUP	DUCK NEST	JEREMY BRAND 256.589.5098 JOE BRINSON 850.459.1858 (T)	
DIVISION/GROUP	IA	ASSIGNED AS NECESSARY	
7b. Air Operations Branch:			
AIR OPS BRANCH DIRECTOR			
AIR ATTACK SUPERVISOR			
AIR SUPPORT SUPERVISOR			
HELICOPTER COORDINATOR			
AIR TANKER COORDINATOR			
9. Prepared By:	Name: SETH D HUDSON	Position/Title: PSC	Signature:
ICS 203	IAP Page	Date/Time: 11/22/2021 1600	<i>Seth D Hudson</i>

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

1. Incident Name:				3.		
TL FALL BRANCH / TL DUCK NEST				Branch:	Division/Group	
2. Operational Period:						
Date/Time From: 11/23/2021 0700 TUE		Date/Time To: 11/23/2021 1900 TUE		FALL BRANCH		
4. Operations Personnel						
OPERATIONS CHIEF		BROCK CAMPBELL 859.556.5065		BRANCH DIRECTOR		
TASKFORCE LEADER		CHARLIE GRAY 706.473.2190		SAFETY OFFICER MICHAEL HURD 334.343.1624		
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
HEQB RANEY				CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
DOZ4 441				CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
ENGB DENSEL				CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
E-1 ENG6 WILDLAND FIRE SVC				CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
ENG6 BANKHEAD 611				CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
C-1 CRW2IA PAT RICK				CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
UTVOP MCFARLAND				CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
UTV AL-ALF				CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
UTV AL-ALF				CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
O-4 EMTF SKUBE			1	CHEAHA TRAILHEAD/0700	CHEAHA TRAILHEAD/1900	
6. Control Operations/Work Assignments:						
Patrol, mop up, and mitigate snags as needed.						
7. Special Instructions:						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	9	171.1375 N		164.1375 N	156.7	A
TACTICAL	3	166.5625 N		166.5625 N		A
AIR TO GROUND	5	169.0875 N		169.0875 N		A
AIR TO GROUND	4	168.2875 N		168.2875 N		A
AIR GUARD	16	168.6250 N		168.6250 N	110.9	A
9. Prepared By (Resource Unit Leader)		Approved By (Planning Section Chief)		Date	Time	
SETH D HDUSON		SETH D HUDSON, PSC		11/22/2021	1600	

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

1. Incident Name:			3.			
TL FALL BRANCH / TL DUCK NEST			Branch:		Division/Group	
2. Operational Period:					DUCK NEST	
Date/Time From: 11/23/2021 0700 TUE		Date/Time To: 11/23/2021 1900 TUE				
4. Operations Personnel						
OPERATIONS CHIEF		BROCK CAMPBELL 859.556.5065		BRANCH DIRECTOR		
DIVISION/GROUP SUPERVISOR		JEREMY BRAND 256.589.5098 JOE BRINSON 850.459.1858 (T)		SAFETY OFFICER		MICHAEL HURD 334.343.1624
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
FFT HARWOOD					STAGING AREA/0700	STAGING AREA/1900
FFT BAKER					STAGING SREA/0700	STAGING AREA/1900
E-641 ENG6					STAGING AREA/0700	STAGING AREA/1900
ENG6 SHOAL FIRE					STAGING AREA/0700	STAGING AREA/1900
O-1 MOD DAVIDSON RVR					STAGING AREA/0700	STAGING AREA/1900
O-8 MOD TAHOE 1					STAGING AREA/0700	STAGING AREA/1900
HEL3 N407HA						
6. Control Operations/Work Assignments:						
Patrol, mop up, and mitigate snags as needed.						
7. Special Instructions:						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	8	171.1375 N		164.1375 N	146.2	A
COMMAND	9	171.1375 N		164.1375 N	156.7	A
COMMAND	10	171.1375 N		164.1375 N	167.9	A
TACTICAL	6	168.7250 N		168.7250 N		A
AIR TO GROUND	5	169.0875 N		169.0875 N		A
AIR TO GROUND	4	168.2875 N		168.2875 N		A
AIR GUARD	16	168.6250 N		168.6250 N	110.9	A
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
SETH D HUDSON			SETH D HUDSON, PSC		11/22/2021	1600

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

1. Incident Name:				3.			
TL FALL BRANCH / TL DUCK NEST				Branch:		Division/Group	
2. Operational Period:				IA GROUP			
Date/Time From: 11/23/2021 0700 TUE		Date/Time To: 11/23/2021 1900 TUE					
4. Operations Personnel							
OPERATIONS CHIEF		BROCK CAMPBELL 859.556.5065		BRANCH DIRECTOR			
DIVISION/GROUP SUPERVISOR		ASSIGNED AS NECESSARY		SAFETY OFFICER		MICHAEL HURD 334.343.1624	
5. Resources Assigned this Period							
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
DOZ4 ALF-SC 451					AS DIRECTED/		
DOZ4 ALF-SC 452					AS DIRECTED/		
DOZ4 ALF-TL 461					AS DIRECTED/		
DOZ4 ALF-TL 762					AS DIRECTED/		
ENG6 641					AS DIRECTED/		
O-1 MOD DAVIDSON RIVER					AS DIRECTED/		
6. Control Operations/Work Assignments:							
Maintain IA readiness. Initiate initial attack as directed.							
7. Special Instructions:							
Identified Group resources are assigned to local districts and Duck Nest Division. Resources will be respond to IA and report to IA Group Supervisor when directed.							
8. Division/Group Communication Summary							
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode	
COMMAND	8	171.1375 N		164.1375 N	146.2	A	
COMMAND	9	171.1375 N		164.1375 N	156.7	A	
COMMAND	10	171.1375 N		164.1375 N	167.9	A	
TACTICAL	3	166.5625 N		166.5625 N		A	
TACTICAL	6	168.7250 N		168.7250 N		A	
AIR TO GROUND	5	169.0875 N		169.0875 N		A	
AIR TO GROUND	4	168.2875 N		168.2875 N		A	
AIR GUARD	16	168.6250 N		168.6250 N	110.9	A	
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)			Date	Time
SETH D HUDSON, PSC			SETH D HUDSON, PSC			11/22/2021	1600

INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)


Controlled Unclassified Information//Basic

1. Incident Name:	2. Date/Time Prepared:	3. Operational Period:	
TL FALL BRANCH / TL DUCK NEST	Date: 11/22/2021 Time: 1600	Date/Time From: 11/23/2021 0700 TUE	Date/Time To: 11/23/2021 1900 TUE

4. Basic Radio Channel Use:

Zone Group	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq	RX Tone/NAC	TX Freq	TX Tone/NAC	Mode (A,D, or M)	Remarks
7	8	COMMAND	BANKHEAD RPTR	COMMAND	171.1375 N		164.1375 N	146.2	A	
7	9	COMMAND	CHEAHA RPTR	COMMAND	171.1375 N		164.1375 N	156.7	A	
7	10	COMMAND	HORN MT RPTR	COMMAND	171.1375 N		164.1375 N	167.9	A	
7	3	TACTICAL	R8 FIRE	FALL BRANCH TACTICAL	166.5625 N		166.5625 N		A	
7	6	TACTICAL	FIRE TAC	DUCK NEST TACTICAL	168.7250 N		168.7250 N		A	
7	5	AIR TO GROUND	A/G 58	AIR TO GROUND PRI	169.0875 N		169.0875 N		A	
7	4	AIR TO GROUND	A/G 50	AIR TO GROUND SEC	168.2875 N		168.2875 N		A	
7	16	AIR GUARD	AIR GUARD	AIR GUARD	168.6250 N		168.6250 N	110.9	A	

5. Special Instructions:

6. Prepared By (Communications Unit Leader)	Name: JASON MCHAN, LSC	Signature: 
ICS 205	IAP Page	Date/Time: 11/22/2021 1600

Controlled Unclassified Information//Basic

COVID SCREENING TOOL

Today or in the past 24 hours, have you had any of the following symptoms¹?

Symptom
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?
Fatigue, outside your normal for firefighting?
Headache, outside your normal for firefighting?
Congestion or runny nose, outside your normal for firefighting?
Nausea or vomiting
Diarrhea
<i>* Take temperature with no-touch thermometer, if available *</i>

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

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 (PII) or Personal Health Information (PHI).

¹ Symptoms of Coronavirus

<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

CORONAVIRUS SAFETY

LIMIT THE SPREAD OF GERMS AND PREVENT INFECTION

Recommends the following steps to help prevent the spread of germs during this situation:

- Practice social distancing by keeping about six feet from others if you must go out in public.
- Wash your hands often with soap and water for at least 20 seconds, especially after being in a public place, or after blowing your nose, coughing or sneezing. If soap and water are not readily available, use a hand sanitizer with at least 60% alcohol.
- Avoid touching your eyes, nose or mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Cover your nose and mouth with a tissue when coughing or sneezing; throw used tissues in the trash. If a tissue isn't available, cough or sneeze into your elbow or sleeve, not your hands.
- Clean and disinfect frequently touched surfaces daily.
- If surfaces are dirty, clean them - use detergent or soap and water prior to disinfection. Full information on how to disinfect found [here](#).
- You should wear a facemask when you are around other people (e.g., sharing a room or vehicle).

According to the CDC, COVID-19 symptoms include fever, shortness of breath and a cough. Symptoms may appear 2-14 days after exposure. Contact Medical Unit Leader for medical advice if you think you have been exposed to COVID-19 and develop symptoms.

Finance

- Personnel and Equipment Time will be conducted virtually on this incident. CTRs and Shift Tickets submitted daily.
- All Finance Documentation must be emailed to **either** Duck Nest **or** Fall Branch:

2021.tlducknest.finance@firenet.gov

2021.tlfallbranch.finance@firenet.gov

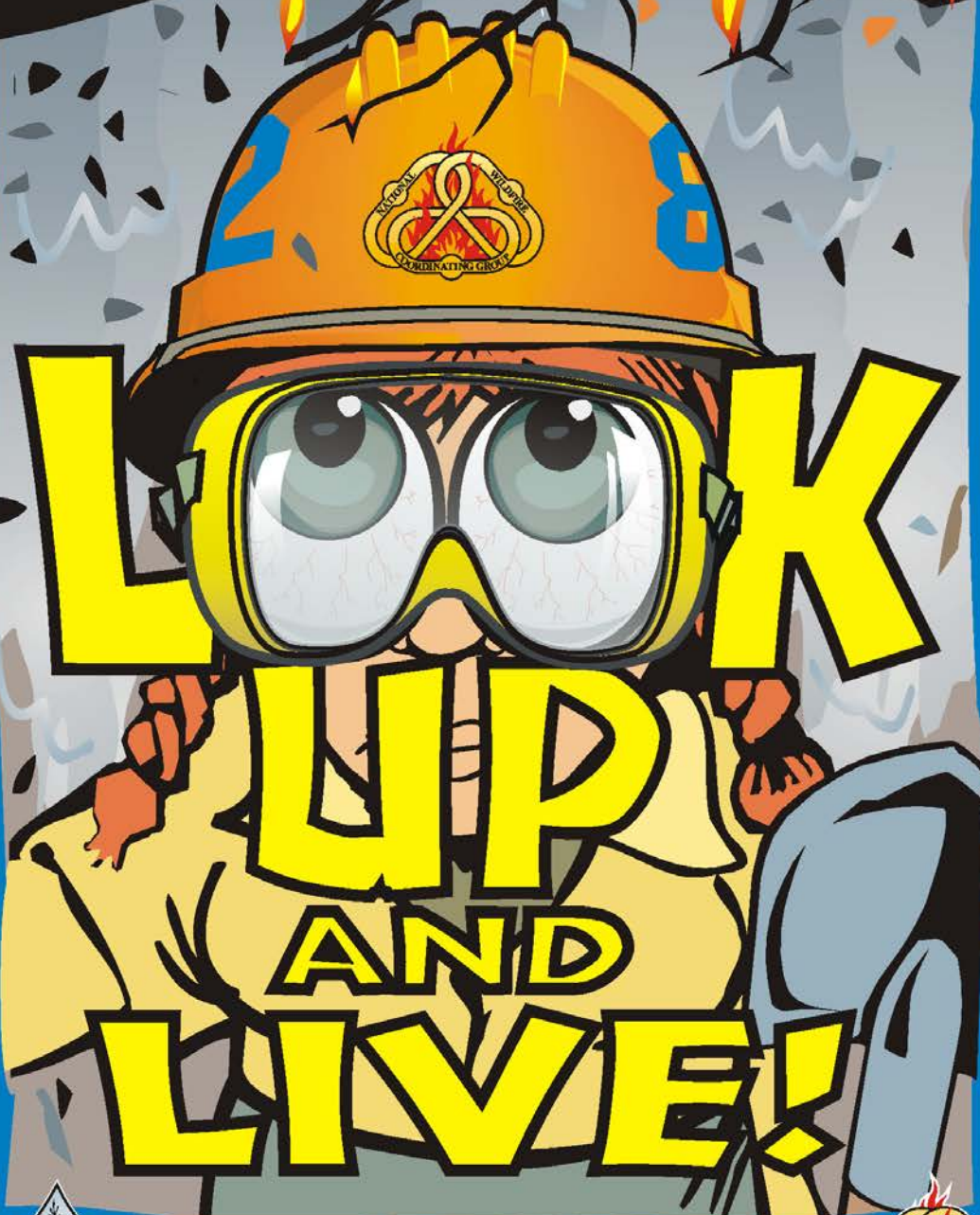
Agreements, Contracts, AD Hire Forms must be emailed to finance before leaving ICP.

- When emailing CTRs or Shift Tickets please include your name, resource order number, and the word TIME in the subject line of the email.
Example: *Bear, Smokey O-123 TIME* or *Owl, Woodsy E-124 TIME*
- (for questions only, please do not text documentation to these numbers)
Lori Hisek 1-501-617-8382
- Please remember that ALL CTRs and Shift Tickets must be signed by your incident supervisor. Hours over 16, how mitigated, no lunch break – enter reason in remarks.
- The top blocks on the CTR will have the info from your Resource Order. In the remarks put the name of the fire you were on that day. If you were on more than one, break out the hours to each fire.
- If you would like to send a photo of your CTR from the paper copy in your CTR book be sure to double check that it is readable before submitting. Sometimes we get them blurry, folded, upside down or in a weird angle and we can't read it. If given the option of attachment size don't select small as this makes it tiny and unreadable.
- If you have any trouble or issues using the E-CTR's please feel free to reach out to us. We can provide you with alternate formats.

QR code to CTR and Shift Tickets.



BE SNAG SMART!



Safety & Health Working Team

www.nwcf.gov/teams/shwt/index2.htm



MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

1. Incident/Project Name		2. Operational Period						
TL Fall Branch / TL Duck Nest		11/23/2021 0700-1900						
3. Ambulance Services								
Name	Complete Address	Phone & EMS Frequency	Advanced Life Support (ALS)					
			Yes	No				
Cleburne County EMS	5902 AL-46 Heflin, AL 36264	911 256-463-2494	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Oxford EMS	12 Hamric Dr. Oxford, AL 36203	256-831-4421	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
4. Air Ambulance Services								
Name	Phone	Type of Aircraft & Capability						
Air Methods	770-214-1351	Medical / No Hoist						
5. Hospitals								
Name Complete Address	GPS Datum – WGS 84 Coordinate Standard Degrees Decimal Minutes DD° MM.MMM' N - Lat DD° MM.MMM' W - Long		Travel Time Air Gnd		Phone	Helipad Yes No		Level of Care Facility
	Lat:							
Regional Medical Center 400 East 10th ST Anniston, AL 36207	Lat: N33 39 22.373		40		256-235-5121	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
	Long: W085 39 26.873							
	VHF:							
Higgins General Hospital 200 Allen Memorial Dr. Bremen, GA 30110	Lat: N33 42 58.964		20	45	770-812-2000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	Long: W085 08 40.422							
	VHF:							
UAB Hospital 1802 6th Ave Birmingham, AL 35233	Lat: N30 30 24.3		40	50	205-934-3411	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1
	Long: W086 48 11.664							
	VHF:							
	Lat:					<input type="checkbox"/>	<input type="checkbox"/>	
	Long:							
	VHF:							
6. Division Branch Group		Area Location Capability						
		EMS Responders & Capability:						
		Equipment Available on Scene:						
		Medical Emergency Channel:						
		ETA for Ambulance to Scene:						
		Air:						
		Ground:						
		Approved Helispot:						
		Lat:						
		Long:						
		EMS Responders & Capability:						
		Equipment Available on Scene:						
		Medical Emergency Channel:						
		ETA for Ambulance to Scene:						
		Air:						
		Ground:						
		Approved Helispot:						
		Lat:						
		Long:						

MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

7. Name & Location	Remote Camp Location(s)		
	Point of Contact:		
	EMS Responders & Capability:		
	Equipment Available on Scene:		
	Medical Emergency Channel:		
	ETA for Ambulance to Scene:		
	Air:		
	Ground:		
	Approved Helispot:		
	Lat:		
	Long:		
	Point of Contact:		
	EMS Responders & Capability:		
	Equipment Available on Scene:		
	Medical Emergency Channel:		
	ETA for Ambulance to Scene:		
	Air:		
	Ground:		
	Approved Helispot:		
	Lat:		
	Long:		
8. Prepared By (Medical Unit Leader)	9. Date/Time	10. Reviewed By (Safety Officer)	11. Date/Time
Jason McHan LSC3	11/22/21 1830		

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° - 3° 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° - 3° 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, 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.

