

HOGPEN
SABINE NATIONAL FOREST
INDIAN MOUNDS WILDERNESS
JULY 31, 2023



TX-TXF-000311

P8 QE62 (0813)

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:	2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____																
3. Objective(s): 																	
4. Operational Period Command Emphasis: 																	
General Situational Awareness 																	
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><input type="checkbox"/> ICS 203</td> <td><input type="checkbox"/> ICS 207</td> <td><u>Other Attachments:</u></td> </tr> <tr> <td><input type="checkbox"/> ICS 204</td> <td><input type="checkbox"/> ICS 208</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input type="checkbox"/> ICS 205</td> <td><input type="checkbox"/> Map/Chart</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input type="checkbox"/> ICS 205A</td> <td><input type="checkbox"/> Weather Forecast/Tides/Currents</td> <td><input type="checkbox"/> _____</td> </tr> <tr> <td><input type="checkbox"/> ICS 206</td> <td></td> <td><input type="checkbox"/> _____</td> </tr> </table>			<input type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	<u>Other Attachments:</u>	<input type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input type="checkbox"/> _____	<input type="checkbox"/> ICS 205	<input type="checkbox"/> Map/Chart	<input type="checkbox"/> _____	<input type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/> _____	<input type="checkbox"/> ICS 206		<input type="checkbox"/> _____
<input type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	<u>Other Attachments:</u>															
<input type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input type="checkbox"/> _____															
<input type="checkbox"/> ICS 205	<input type="checkbox"/> Map/Chart	<input type="checkbox"/> _____															
<input type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/> _____															
<input type="checkbox"/> ICS 206		<input type="checkbox"/> _____															
7. Prepared by: Name: _____ Position/Title: _____ Signature: _____																	
8. Approved by Incident Commander: Name: _____ Signature: _____																	
ICS 202	IAP Page _____	Date/Time: _____															

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Incident Commander(s) and Command Staff:		7. Operations Section:	
IC/UCs		Chief	
		Deputy	
Safety Officer		Staging Area	
Public Info. Officer		Branch	
Liaison Officer		Branch Director	
Hospital Liaison Officer		Deputy	
4. Agency/Organization Representatives:		Division/Group	
Agency/Organization	Name	Division/Group	
		Division/Group	
		Division/Group	
		Division/Group	
		Branch	
		Branch Director	
		Deputy	
5. Planning Section:		Division/Group	
Chief		Division/Group	
Deputy		Division/Group	
Resources Unit		Division/Group	
Situation Unit		Division/Group	
Documentation Unit		Branch	
Demobilization Unit		Branch Director	
Technical Specialists		Deputy	
		Division/Group	
		Division/Group	
		Division/Group	
6. Logistics Section:		Division/Group	
Chief		Division/Group	
Deputy		Air Operations Branch	
Support Branch		Air Ops Branch Dir.	
Director			
Supply Unit			
Facilities Unit		8. Finance/Administration Section:	
Ground Support Unit		Chief	
Service Branch		Deputy	
Director		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Comp/Claims Unit	
Food Unit		Cost Unit	
9. Prepared by: Name: _____ Position/Title: _____ Signature: _____			
ICS 203	IAP Page ____	Date/Time: _____	

ASSIGNMENT LIST (ICS 204)

1. Incident Name: Hogpen		2. Operational Period: Date From: 07/31/2023 Date To: 07/31/2023 Time From: 0700 Time To: 2100			3. Branch:
4. Operations Personnel: <u>Name</u> <u>Contact Number(s)</u> Operations Section Chief: Division/Group Supervisor: Danielle Spendlove (T) / Don Garmen				Division: Alpha Group: Staging Area:	
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information
Resource Identifier	Last Work Day	Leader			
C-2 Cherokee IHC		Ballestros	20		
E-15 ENG T6		Green	2		
E-6 ENG114 T6		Shore	3		
O-35 FFT1		Kartye	1		
O-56 FFT1		Harris	1		
O-36 FFT1 (T)		Kiskin	1		
O-45 EMTF		Rahim	1		
6. Work Assignments:					
<ul style="list-style-type: none"> Complete handline. Prepare for burn-out along Butler Point Road. Monitor fire progress. 					
7. Special Instructions:					
8. Communications (radio and/or phone contact numbers needed for this assignment):					
<u>Name/Function</u>			<u>Primary Contact:</u> indicate cell, pager, or radio (frequency/system/channel)		
R8 Fire / Tactical			_____		
Sabine Direct / Command			_____		
Sabine Repeater / Command			_____		
Air to Ground 7 /			_____		
Prepared by (Resource Unit Leader)		Approved by (Planning Section Chief)		Date Prepared	Time Prepared

Hogpen Fire

Wildfire

Forecast Start Time: 2023-07-31 7:00 AM CDT

Request Time: 2023-07-30 7:28 PM CDT

Deliver Time: 2023-07-31 6:00 AM CDT

Forecast Complete At: 2023-07-31 5:23 AM CDT

Requested By: US Forest Service

Contact:

Phone:

Fax:



Location Legal:
 Lat/Lon: 31.3438 / -93.7043
 Quad:
 Calculated: 31.3438 / -93.7043

Elevation:
 Drainage:
 Aspect:
 Size:
 Fuel Type:

Site	Date	Elev	Observations							
			Wind	Temp	WB	RH	Td	Sky	Wx	Rmks
No observations available										
Submit New Observation										

Requested Parameters	Remarks
X X X Sky/Weather	
X X X Temperature	
X X X Humidity	
X X X Chance of Wetting Rain	
X X X Wind (20 FT)	
X X X Mixing Height	
X X X Transport Winds	
X X X Transport Winds (m/s)	

Forecast:

Spot Forecast for Hogpen Fire...US Forest Service
 National Weather Service Shreveport LA
 523 AM CDT Mon Jul 31 2023

Forecast is based on forecast start time of 0700 CDT on July 31.
 If conditions become unrepresentative...contact the National Weather Service.

Please contact our office at (318) 631-3669 ext. 241, if you have questions or concerns with this forecast.

...HEAT ADVISORY IN EFFECT UNTIL 11 AM CDT THIS MORNING...
 ...EXCESSIVE HEAT WARNING IN EFFECT FROM 11 AM THIS MORNING TO 8 PM CDT THIS EVENING...
 ...HEAT ADVISORY IN EFFECT FROM 8 PM THIS EVENING TO 10 PM CDT TUESDAY...

.DISCUSSION...

Continued dry and hot conditions are expected with minimum RH values around 30 to 45 percent today. Otherwise, mixing heights will climb above 5kft with afternoon high temperatures from the upper 90s to lower 100s. /16/

.REST OF TODAY...

Sky/weather.....Mostly sunny (25-35 percent). Slight chance of showers and thunderstorms in the afternoon.
 CWR.....0 percent increasing to 20 percent in the afternoon.
 Temperature.....79 at forecast start...Max 103.
 RH.....74 percent at forecast start...Min 34 percent.
 Wind (20 ft).....
 Slope/valley.....Winds west at 4 mph at forecast start...otherwise West winds around 5 mph early in the morning becoming light, then becoming northeast around 6 mph early in the afternoon shifting to the east around 5 mph. Gusty and erratic winds expected near thunderstorms in the afternoon.
 Mixing height.....400 ft AGL at forecast start...otherwise 7800 ft AGL.
 Transport winds.....Northwest 6 to 7 mph shifting to the northeast 6 to 8 mph in the afternoon.
 Transport winds m/s..West around 3 meters/second shifting to the northeast 3 to 4 meters/second in the afternoon.

TIME (CDT)	7AM	8AM	9AM	10A	11A	12P	1PM	2PM	3PM	4PM	5PM
Sky (%).....	14	12	18	24	29	36	47	45	45	46	45
Weather cov.....							SCH	SCH	SCH	SCH	SCH
Weather type....							RW	RW	RW	RW	RW
Tstm cov.....							SCH	SCH	SCH	SCH	SCH
CWR.....	0	0	0	0	0	0	20	20	20	20	20
Temp.....	79	82	86	92	95	98	100	101	101	102	100
RH.....	74	72	65	54	48	42	38	36	36	34	38
20 FT wind dir..	W	W	NW	NW	N	NE	N	NE	NE	N	E
20 FT wind spd..	4	5	4	4	5	5	5	5	6	6	6
20 FT wind gust.	5		5	6	6	7	7	7	8	10	10
Mix hgt (kft)...	0.4	0.6	1.1	2.0	3.0	5.0	6.2	7.0	7.8	6.9	5.0
Transp wind dir.	W	W	NW	N	N	NE	NE	NE	E	E	E
Transp wind spd.	7	7	6	5	6	6	7	7	7	7	8
Trans wind dir..	W	W	NW	N	N	NE	NE	NE	E	E	E
Trans spd (m/s).	3	3	3	2	3	3	3	3	3	3	4

.TONIGHT...

Sky/weather.....Partly cloudy (40-50 percent) then becoming mostly cloudy (50-60 percent) then becoming partly cloudy (35-45 percent). Slight chance of showers and thunderstorms early in the evening.
 CWR.....20 percent decreasing to 0 percent in the late evening and overnight.
 Temperature.....Min 80.
 RH.....Max 74 percent.
 Wind (20 ft).....
 Slope/valley.....East winds 5 to 6 mph shifting to the south around 5 mph in the late evening and overnight, then becoming light after 3 am. Gusty and erratic winds expected near thunderstorms early in the evening.
 Mixing height.....400 ft AGL.
 Transport winds.....Southeast around 8 mph shifting to the east 9 to 12 mph early in the evening, then shifting to the southeast 3 to 8 mph in the late evening and overnight shifting to the southwest early in the morning.
 Transport winds m/s..Southeast around 4 meters/second shifting to the east 4 to 5 meters/second early in the evening, then shifting to the southeast 1 to 4

meters/second in the late evening and overnight
shifting to the southwest around 1
meters/second early in the morning.

TIME (CDT)	6PM	7PM	8PM	9PM	10P	11P	MID	1AM	2AM	3AM	4AM	5AM
Sky (%)	45	56	63	58	59	55	53	51	35	32	32	43
Weather cov	SCH	SCH	SCH	SCH								
Weather type	RW	RW	RW	RW								
Tstm cov	SCH	SCH	SCH	SCH								
CWR	20	20	20	20	0	0	0	0	0	0	0	0
Temp	99	96	91	87	86	84	84	84	83	82	80	81
RH	39	45	54	65	65	70	67	67	70	72	74	72
20 FT wind dir	SE	E	SE	SE	S	S	SE	SE	SE	S	W	W
20 FT wind spd	6	6	5	5	4	5	4	4	5	4	3	3
20 FT wind gust	8	8	8	7	6	6	6	6	6	6	5	5
Mix hgt (kft)	4.2	2.5	0.5	0.4	0.4	0.5	0.4	0.4	0.5	0.4	0.4	0.4
Transp wind dir	SE	NE	E	E	SE	SE	SE	E	SE	SE	SE	SW
Transp wind spd	8	10	12	9	8	8	6	6	7	6	3	3
Trans wind dir	SE	NE	E	E	SE	SE	SE	E	SE	SE	SE	SW
Trans spd (m/s)	4	4	5	4	4	4	3	3	3	3	1	1

.TUESDAY...

Sky/weather.....Mostly sunny (30-40 percent).

CWR.....10 percent.

Temperature.....Max 103.

RH.....Min 33 percent.

Wind (20 ft).....

Slope/valley.....Light winds becoming northeast around 6 mph in the afternoon.

Mixing height.....6700 ft AGL.

Transport winds.....West 5 to 6 mph shifting to the north late in the morning, then shifting to the east 6 to 7 mph in the afternoon.

Transport winds m/s.....West around 2 meters/second becoming 2 to 3 meters/second in the morning, then shifting to the northeast early in the afternoon shifting to the east around 3 meters/second late in the afternoon.

TIME (CDT)	6AM	7AM	8AM	9AM	10A	11A	12P	1PM	2PM	3PM	4PM	5PM
Sky (%)	43	42	35	40	35	33	27	33	33	33	33	33
Weather cov												
Weather type												
Tstm cov												
CWR	0	0	0	0	0	0	0	10	10	10	10	10
Temp	80	80	82	86	92	94	97	99	100	101	102	101
RH	74	74	74	68	54	49	45	42	40	38	33	35
20 FT wind dir	NW	NW	NW	W	W	N	N	NE	NE	E	E	E
20 FT wind spd	2	2	3	4	5	5	5	5	5	6	6	6
20 FT wind gust	4	4	5	6	6	6	6	6	7	7	8	8
Mix hgt (kft)	0.4	0.3	0.5	1.2	1.9	3.1	4.1	5.5	5.8	6.4	6.7	5.5
Transp wind dir	W	W	W	W	NW	NW	N	NE	E	E	E	E
Transp wind spd	5	5	6	5	6	6	5	6	6	6	7	7
Trans wind dir	W	W	W	W	NW	NW	N	NE	E	E	E	E
Trans spd (m/s)	2	2	3	2	3	3	2	3	3	3	3	3

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Forecaster...CASSEL

Requested by...Joey Silva

Type of request...WILDFIRE

.TAG 2317839.0/SHV

.DELDT 07/31/23

.FormatterVersion 1.0.26

ICS-220 AIR OPERATIONS SUMMARY

Prepared By: Grady Wilson

Prepared Time: 1800

1. INCIDENT NAME: HOGPEN		2. OP/S PERIOD DATE: 07-31-2023		START TIME: 0800	END TIME: 2000	LFK SUNRISE: 0635	LFK SUNSET: 2015	LFK Pumpkin: 2045
3. REMARKS (Safety Notes, Hazards, Air Operations Special Equipment, etc.): <i>Keep communications, clear, concise, brief</i> Note: Status was current as of the time this report was posted. Be advised that changes occur constantly.					4. READY ALERT AIRCRAFT *Call Dispatch to order Air Ambulances.		5. TFR's: Hogpen-3/3534 Surface to 2500' MSL	
CHECK the Weather!								

6. POSITION	NAME	PHONE #	7. FREQUENCIES	AM	FM	8. FIXED-WING- Type/ Make-Model/ N#/ Base
N351FW HMGB	Matt Smith	(704) 718-6505	AIR/AIR PRIMARY TFR	118.475		ORDER ALL AIRCRAFT THROUGH DISPATCH ORDER WHAT YOU NEED H-41 Milam Helispot (Office): N31 26 16 x W093 46 10 H-43 Hogpen Helispot (Pipeline@ Rd 3382): N31 21 54 x 93 43 27 Please email your aircraft cost daily and ctr's to: 2023.hogpen.finance@firenet.gov
N660FS HMGB	Tim Beck	(936) 433-9694	AIR/AIR Secondary	133.175		
UAS	Kyle Sommers	(936) 707-4022	A/G #7 PRIMARY	166.850	166.850	
TICC Dispatch	Aircraft Desk	(936) 639-8198	A/G #58 SECONDARY	169.0875	169.0875	
			NATIONAL FLT FOLLOW		168.6500 110.9 TX/RX	
			AIR GUARD		168.6250 110.9 TX/RX	
NOTES: PLANNED MISSIONS: Order as needed. T1-N660FS is assigned to Forest IA, but available for Hogpen support.			Aircraft will RON at Lufkin Airport and will relocate out in the morning, as weather allows.			

9. HELICOPTERS

CALL SIGN / FAA N#	TY	MAKE/ MODEL	BASE	AVAIL Start	AVAIL Stop	REMARKS	CALL SIGN / FAA N#	TY	MAKE/ MODEL	BASE	AVAIL	REMARKS
H-351FW	T3	AS350/B2	LFK	0830	2000	Recon, Bucket, Long Line, PSD- Manager + 2						
H-660FS	T1	UH60	LFK	0830	2000	Bucket-Manager+0						
UAS UR-31	3	Alta	Milam	varies	varies	Schedule with IC/Ops-Recon, IR, PSD						

INCIDENT RADIO COMMUNICATIONS PLAN ICS-205				1. INCIDENT NAME: HOGPEN		2. DATE/TIME PREPARED: 7/27/23 0900		3. OPERATIONAL PERIOD: 7/31/2023 0700-2100		
Ch#	Function	Channel Name	Assignment	RX Freq	N/W	RX Tone/NAC	TX Freq	N/W	TX Tone/NAC	Remarks
1	TACTICAL	ANG DIR	Angelina Direct	172.2250	N	100.0	172.2250	N	100.0	
2	COMMAND	ANG RPT	Angelina Repeater	172.2250	N	100.0	164.8250	N	100.0	
3	TACTICAL	VFIRE21	VFIRE21 Interoperability	154.2800	N	156.7	154.2800	N	156.7	
4	TACTICAL	SAB DIR	Sabine Direct Command	171.5000	N	100.0	171.5000	N	100.0	
5	COMMAND	SAB RPT	Sabine Repeater Command	171.5000	N	100.0	164.8000	N	100.0	
6	COMMAND	HXLY RPT	North Sabine Huxley Repeater	171.5000	N	100.0	164.8000	N	123.0	
7	TACTICAL	TAC A	Unassigned	159.4350	N	114.8	159.4350	N	114.8	
8	TACTICAL	TAC B	Unassigned	151.4750	N	114.8	151.4750	N	114.8	
9	TACTICAL	TAC C	Unassigned	159.3150	N	114.8	159.3150	N	114.8	
10	TACTICAL	COMPACT	Southern Compact	159.2850	N	0.0	159.2850	N	0.0	
11	TACTICAL	TXF T1	DIVS Alpha	168.6750	N	0.0	168.6750	N	0.0	
12	TACTICAL	R8 FIRE	DIVS Sierra	166.5625	N	0.0	166.5625	N	0.0	
13	AIR TO GROUND	FS A/G 7	FS Air-to-Ground 7	166.8500	N	0.0	166.8500	N	0.0	
14	AIR TO GROUND	FS A/G 40	Unassigned	167.4500	N	0.0	167.4500	N	0.0	
15	AIR TO GROUND	TFS A/G 1	Unassigned	159.3000	N	114.8	159.3000	N	114.8	
16	AIR TO GROUND	AIRGUARD	Air Guard	168.6250	N	0.0	168.6250	N	110.9	
1. Special Instructions										
2. ICS-205 Updated By:				Name: Jon King				Signature:		

MEDICAL PLAN (ICS 206)

1. Incident Name: Hogpen		2. Operational Period: Date From: 7/29/2023 Date To: 8/05/2023 Time From: 0700 Time To: 2000					
3. Medical Aid Stations: Record on-site medical personnel, location, equipment, and frequency							
Name	Location	Contact Number(s)/Frequency	Paramedics on Site? <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				
			<input type="checkbox"/> Yes <input type="checkbox"/> No				
4. Transportation (indicate air or ground):							
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service				
Ground	Contact Lufkin Dispatch or 911/County	See attached list	<input type="checkbox"/> ALS <input type="checkbox"/> BLS				
Air	Coordinate with Lufkin Dispatch or County	See attached list	<input type="checkbox"/> ALS <input type="checkbox"/> BLS				
	*See attached list for County contact info		<input type="checkbox"/> ALS <input type="checkbox"/> BLS				
			<input 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			
Memorial Hermann Texas Medical Center	6411 Fannin St, Houston, TX N 29.713873 W 95.395015	713-704-4350	95	N/A	<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
LSU Health Shreveport	1501 Kings Hwy, Shreveport, LA N 32.481656 W 93.760804	318-675-6850	75	N/A	<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
Nacogdoches Memorial Hospital	1204 N Mounds St, Nac., TX N 31.612701 W 94.647608	936-564-4611	43	86	<input checked="" type="checkbox"/> Yes Level: 3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
CHI St Lukes Health Memorial	1201 W Frank Ave, Lufkin, TX N 31.336253 W 94.741182	936-631-6789	40	80	<input checked="" type="checkbox"/> Yes Level: 4	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Sabine County Hospital	2301 Worth Street, Hemphill, TX	409-787-3300	6	20	<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6. Special Medical Emergency Procedures:							
<ul style="list-style-type: none"> -Provide First Aid and gather information for Medical Incident Report -Contact Lufkin Dispatch or 911/County Dispatch <ul style="list-style-type: none"> -Provide rendezvous point for EMS transport, or arrange non-emergent transport -Transport EMS personnel to patient, or transport patient to rendezvous point -Coordinate with EMS personnel on appropriate medical facility -Provide follow-up for patient at hospital 							
<input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.							

HOGPEN FIRE
SABINE NF
SAFETY MESSAGE

July 31, 2023

COMPLACENCY

Complacency is known as the silent killer.

Accidental injury has become the No. 3 cause of death for the first time in U.S. history. Injury statistics examined by National Safety Council data experts confirm that preventable deaths rose 10% in 2016. Based on new injury statistics, an American is accidentally injured every second and killed every three minutes by a preventable event – a drug overdose, a vehicle crash, a fall, a drowning or another preventable incident. A total of 14,803 more people died accidentally in 2016 than in 2015, the largest single-year percent rise since 1936.

Complacency is the driving force behind most mishaps!

Three goals to put complacency in its place:

- Be team minded.
- Maintain situational awareness.
- Follow your checklists.

Your safety team says: Don't be these guys!



Let's be smart, have fun and take care of each other.

Safety Team - David (Dave) Shore - SOF2, Dale Snyder - SOFC(T)

Hotel Safety

- Don't answer the door in a hotel room without verifying who it is. If a person claims to be an employee, call the front desk and ask if someone from the staff is supposed to have access to your room and for what purpose.
- When returning to your hotel late in the evening, use the main entrance of the hotel. Be observant and look around before exiting your vehicle.
- Close the door securely whenever you are in your room and use all the locking devices provided.
- Don't needlessly display guest room keys in public or carelessly leave them on restaurant tables, at the swimming pool, or in places where they can easily be stolen.
- Don't draw attention to yourself by displaying large amounts of cash or expensive jewelry.
- Don't invite strangers to your room.
- Place all valuables in the hotel safe deposit box.
- Do not leave valuables in your vehicle.
- Check to see that any sliding glass doors or windows and any connecting room doors are locked.
- Ensure that you know the emergency exits in case of fire or other emergencies. Avoid elevators in case of fire.

Elevator Safety:

- Observe all passengers in elevators.
- It is wise to board last and select floor buttons last.
- If possible, position yourself near the elevator control panel and if attacked, push as many floor buttons as possible. Keep your back to the sidewall.
- If someone suspicious boards an elevator, exit as soon as possible.

Parking Lot Safety:

- Any person walking alone, male or female, is potential prey for assault. Walk with a friend or family member whenever possible.
- Walk purposefully and look confident. Assertive body language can help prevent an attack. Don't slouch...keep your head up. Look as though you would cause an uproar if bothered.
- Try not to carry a lot of packages at once, as this makes you an easy target.
- As you walk observe those around you. Notice if there are any strangers sitting in parked cars or standing in your pathway. If so, choose an alternate route and by all means, avoid them.
- Stay away from isolated or poorly lit areas. Avoid walking near shrubbery which can hide attackers.
- Always be alert and aware. Have your car keys in your hand and be ready to unlock the door without delay.
- As you approach your car, look under and around it. Before getting in your car look in the back seat and on the floor.
- If uncomfortable, ask coworker for escort.

News from the Information Shop

Welcome to the Hogpen Wilderness Fire!

If you get any amazing photos or video you'd like to share, please text them to Mandy Chumley at 936.366.3733 or email to mandy.chumley@usda.gov

Facebook

U.S. Forest Service - National Forests and Grasslands in Texas

We are updating the bulletin board at the ICP so keep an eye out for Riveting Information.

Stay safe out there.

Human Resource Message

Accept that we all are human resources, but we are humans first and resources later.



Avoid Horseplay!

HORSEPLAY is rough and rowdy play that does not contribute effectively to a productive and safe work environment.

Hogpen Fire Finance Message – 7/31/2023

Email CTRs, Shift tickets, Casual hire forms, and contacts/agreements to 2023.hogpen.finance@firenet.gov

Please get your time up to date as soon as possible.

- All finance documentation needs to be submitted to Finance via email.
 - Preferred format is PDF.
 - In the email subject, please put your RO#, doc type (CTR, Contract, etc.), and the date(s) you are submitting – this helps search the inbox for missing items.
- 2-Days on one CTR is acceptable.
- OF-288/OF-286 will be created for each resource at the end of your assignment.
- If claiming H-Pay or showing no lunch break, please make sure there is an explanation in the remarks of the CTR – Follow what is outlined in the NWCG Standards for Interagency Incident Business Management. (Yellow book)
- Make sure you have the correct date, RO#, remarks, and supervisor's signature before submitting your time.
- Claims – Fill out an OF-289 with the attachment. The form is on the link tree (QR code on IAP cover).
 - Pictures of the damage are mandatory.
 - Manufacture dates for tires are mandatory as well. Email claims with questions and/or all appropriate documentation to the finance email.

For any questions regarding Finance, contact Kelly Reeves, FSC3, 936-676-6387

Last Work Day

Incident: HOGPEN US-TX-TXF-000311

07/31/2023 - 08/14/2023

07/31/2023

OVERHEAD

TFLD	O-22	SPENDLOVE, DANIELLE
SMOD	O-7	SMOD - LA-KIF SMOD
FFT1	O-35	KARTYE, MATTHEW KYE
FFT1	O-36	KISKIN, ROBERT JAMES

08/01/2023

OVERHEAD

HEQB	O-30	JONES, DAVID
HEQB	O-34	LYONS, SAM
FFT1	O-33	PANKRATZ, NATHAN
FFT1	O-31	JOPPA, BENJAMIN J
FFT1	O-55	DESOTO, ANDREW LEVI
TFLD	O-20	LARICOS, MATTHEW CURTIS

08/02/2023

OVERHEAD

LSC2	O-8	PHILIPPS, THOMAS C
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08/04/2023

OVERHEAD

FSC3	O-21	REEVES, KELLY
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08/06/2023

OVERHEAD

TFLD	O-39	SOWELL, JAMES T
DRIV	O-27	FORBIS, JESSICA N
HLIA	O-59	KAILEY, BRITTANY R

08/07/2023

CREWS

CR2I	C-2	CR2I - CHEROKEE IHC
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OVERHEAD

FFT1	O-11	MOORE, RANDY BERNARD
WFA3	O-10	GALLANT, DANIEL LOGAN
UASP	O-5	SOMMERS, KYLE A
ICT3	O-29	SILVA, JOEY
GISS	O-37	LOPEZ, CHELSEA ALEXANDRA
THSP	O-47	CHUMLEY, JAMES L
THSP	O-13	CHUMLEY, MANDY
RESL	O-62	NEAL, MONICA L

Last Work Day

Incident: HOGPEN US-TX-TXF-000311

07/31/2023 - 08/14/2023

08/08/2023

OVERHEAD

PIO2	O-4	AMEN, JAN
SOF2	O-2	SHORE, DAVID
WFA3	O-38	TYREE, JIMMY
REAF	O-9	TERRY, ADAM

08/09/2023

EQUIPMENT

ENG6	E-9	ENG6 - MSMNF 612
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OVERHEAD

HECM	O-14	KRUEGER, JOHN MICHAEL
ICT3	O-40	KLAWINSKY, JASON

08/10/2023

CREWS

CRW2	C-1	CRW2 - PR-EYF - C3
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EQUIPMENT

ENG6	E-6	ENG6 - SCHOLL FIRE & FUELS MANAGEMENT INC - D64957
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OVERHEAD

HECM	O-19	CANADA, TREVOR FORD
TFLD	O-25	WILLOUGHBY, JON A
HMGB	O-18	SMITH, MATTHEW G
TFLD	O-24	GARMAN, DONALD W
TFLD	O-49	KING, JON
EQPM	O-26	TRUSS, BRIAN

08/11/2023

EQUIPMENT

ENG6	E-7	ENG6 - WILDLANDS FIRE SERVICE INC - A13317
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OVERHEAD

THSP	O-60	SNYDER, DALE
EMTF	O-45	REDLINEEMERGENCYSERVICESLLC,
EMTF	O-46	LARSEN, MICHAEL

08/12/2023

EQUIPMENT

ENG6	E-15	ENG6 - E-41 LA-KIF
ENG6	E-4	ENG6 - BALDWIN FORESTRY, LLC - B64166

OVERHEAD

RCDM	O-51	BINGHAM, JOHN BEN
BCMG	O-52	ZEYER, KYLE R
SPUL	O-50	COOKSEY, LEMUEL GARLAND

HOG PEN INCIDENT

TX-TXF0000311

DEMOBILIZATION CHECK-OUT PROCESS

This incident is using a virtual checkout process for demobilization. **Please do not leave the incident until the follow steps have been completed!**

1. **24 hours prior** to demobilization date, please ensure that:
 - Your incident supervisor has submitted a [Demob Request](#), in coordination with the Demob unit.
 - If you need a flight arranged for you, please submit a [Flight Request Form](#).



Demob Request Form

2. **On your demob date**, please check out with the following units.
 - Supply Unit – Return gear and supplies.
 - Ground Support/Weed Wash – Return pool NERV rentals, receive inspections, etc.
 - Communications Unit – Return Radios and other communications equipment.
 - Time/Finance – Ensure that all CTRs and/or shift tickets have been submitted and **you have received your final, signed OF-288 Time Report or OF-286 invoice.**



Flight Request Form

3. **Once you have completed the above steps**, please fill out the [Demob Checkout Form](#) and contact the Demob Unit Leader to confirm your release from the incident. **PLEASE DO NOT FILL OUT THE DEMOB RELEASE FORM UNTIL ALL PRIOR STEPS BEEN COMPLETED!**
 - Demob Unit Leader: (618) 694-8435, 2023.hogpen.demob@firenet.gov



Demob Checkout Form

ACTIVITY LOG (ICS 214)

1. Incident Name:	2. Operational Period: Date From:	Date To:
	Time From:	Time To:
3. Name:	4. ICS Position:	5. Home Agency (and Unit):
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° – 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>
Evacuation 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. EVACUATION 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 ETAs of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.