

Cypress Creek Fire

Incident Action Plan

TX-TXF-000138

Operational Period

02/28/26

0600-2200



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 ☐ No ☐ 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%;">☐ ICS 203</td><td style="width: 33%;">☐ ICS 207</td><td style="width: 34%;"><u>Other Attachments:</u></td></tr><tr><td>☐ ICS 204</td><td>☐ ICS 208</td><td>☐ _____</td></tr><tr><td>☐ ICS 205</td><td>☐ Map/Chart</td><td>☐ _____</td></tr><tr><td>☐ ICS 205A</td><td>☐ Weather Forecast/Tides/Currents</td><td>☐ _____</td></tr><tr><td>☐ ICS 206</td><td></td><td>☐ _____</td></tr></table>			☐ ICS 203	☐ ICS 207	<u>Other Attachments:</u>	☐ ICS 204	☐ ICS 208	☐ _____	☐ ICS 205	☐ Map/Chart	☐ _____	☐ ICS 205A	☐ Weather Forecast/Tides/Currents	☐ _____	☐ ICS 206		☐ _____
☐ ICS 203	☐ ICS 207	<u>Other Attachments:</u>															
☐ ICS 204	☐ ICS 208	☐ _____															
☐ ICS 205	☐ Map/Chart	☐ _____															
☐ ICS 205A	☐ Weather Forecast/Tides/Currents	☐ _____															
☐ ICS 206		☐ _____															
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: Cypress Creek Fire		2. Operational Period: Date From: 02/28/26 Date To: 02/28/26 Time From: 0600 Time To: 2200		
3. Incident Commander(s) and Command Staff:		7. Operations Section:		
IC/UCs	Cody Canning / Joey Silva (t)	Chief - trainee	Tracy Milakovic	
		Deputy		
Deputy		Staging Area		
Safety Officer	David Shore	Branch		
Public Info. Officer	Mandy Chumley	Division/Group	A	Dustin Morris
Liaison Officer		Division/Group	B / C	Jason Fink / Chris Smith (t)
4. Agency/Organization Representatives:		Division/Group		
Agency/Organization	Name	Division/Group		
Agency Administrator	Logan Gallant	Group		
		Group		
		Group		
		Branch		
		Branch Director		
		Deputy		
5. Planning Section:		Division/Group		
Chief	Carol O'Bryan	Division/Group		
GISS	Chelsea Lopez	Division/Group		
GISS	Brianna Gibson	Division/Group		
ITSS	Yasmir Diaz-Rohweder	Division/Group		
REAF	Alison Ochoa	Branch		
		Branch Director		
		Deputy		
		Division/Group		
		Division/Group		
		Division/Group		
6. Logistics Section:		Division/Group		
Chief	Tom Phillips	Division/Group		
ORDM	Sherri Kite	Air Operations Branch		
Support Branch		AOBD	Grady Wilson	
Director		HEBM		
Supply Unit		SEMG		
Facilities Unit		8. Finance/Administration Section:		
Ground Support Unit		Chief	ReShauna Mattox	
Service Branch		Deputy		
Director		Time Unit	Gina Gwin	
Communications Unit		Procurement Unit		
Medical Unit		Comp/Claims Unit		
Food Unit		Cost Unit		
9. Prepared by: Name: <u>Carol O'Bryan</u> Position/Title: <u>PSCC</u> Signature: <u>/s/ Carol O'Bryan</u>				
ICS 203		IAP Page _____ Date/Time: <u>02/27/26</u>		

SAFETY MESSAGE

Cypress Creek Fire

DATE & SHIFT:
02/28/26

Radio Communications Checks

Reminders:

Make sure you have COMMO with the folks you are working with.

BASIC INFO HERE!

- 1) Beginning of the day – Test the radios out.
- 2) Ensure you are on the correct channel for the assigned mission – know the channels we are to be using!
- 3) Common testing/items to check are: batteries (pwr) being new at the start of the day. Test the radio with co-workers or dispatch making sure you are transmitting clear & undistorted.
- 4) When speaking into the radio – talk 2 to 3 inches away from the radio microphone doing so in a clear & normal tone of voice. DO NOT SPEAK SOFTLY AS THIS DOES MAKE IT DIFFICULT FOR THE RECEIVING FOLKS TO MAKE YOU OUT. Leaving the radio on your chest (Chest Pack) while speaking creates some problems also – make sure to turn the radio towards you when speaking if using this type. Also using the portable this way does not propagate the radio signal as well as holding the portable straight up & down & speaking into the radio.
- 5) If your radio is NOT working up to par – get another one lined up if possible!
- 6) Common causes of poorly operating units include: bad batteries or pack, poor antenna or antenna connection.
- 7) Don't handle the portable by the antenna – this often times loosens the connections internally - making the radio unusable until it is repaired.
- 8) Bottom line is – check your COMMO before every shift out there, make sure it's working!!

DIVISION/GROUP ASSIGNMENT LIST (ICS 204 WF)

Controlled Unclassified Information//Basic

1. Incident Name				3.			
Cypress Creek Fire				Branch	Division A		
Date/Time From: 0600		Date/Time To: 2200					
4. Operations Personnel							
Operations Chief	Tracy Milakovic			Division/Group Supervisor		Dustin Morris O-11	
Branch Director				Air Attack Supervisor			
5. Resources Assigned this Period							
Strike Team/Task Force/ Resource Designator	EMT	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
HEQB (t) O-19			Kye Kartye	1	0600	2200	
DOZ3 – TXTXF 311 E-2		2/28	Brett Byley O-12	1	0600	2200	
FFT1 O-13		3/12	Danny Harris	1	0600	2200	
FFT2 O-14		3/08	Aaron Thompson	1	0600	2200	
FFT2 O-15		3/01	Payton Lyons	1	0600	2200	
FFT2 O-16		3/08	Kaytlin (Ford) Thacker	1	0600	2200	
FFT2 O-17		3/08	Case Woods	1	0600	2200	
FMOD – Manit				4	0600	2200	
FMOD – San Juan				2	0600	2200	
FMOD – Oklahoma				4	0600	2200	
EMTF – Jet Medic		3/13	Lance Lutrel	1	0600	2200	
EMTF – Jet Medic		3/13	Greg Rushing	1	0600	2200	
6. Control Operations/Work Assignments:" 1. Provide For Firefighter and Public safety. 2. Keep Fire Within Identified control lines. 3. Protect any identified values at risk. 4. Minimize Resource damage. 5. Mop-Up 1-2 chains in where necessary							
7. Special Instructions: 1. UTV use is approved for designated roadbeds Only. 2. Chainsaws and leaf blowers are approved. 3. Back Haul all any equipment not being used. 4. Back Haul all trash.							
8. Division/Group Communication Summary							
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode	
Command	ANG RPT	172.2250	100.0	164.8250			
Tactical Div/Group	R8 Fire	166.5625	0.0	166.5625			
Air to Ground Primary	A / G #7	166.8500		166.8500			
Air to Ground Secondary	A / G #58	169.0875		169.0875			
9. Prepared by (Resource Unit Leader) Carol O'Bryan - PSCC			Approved by (Planning Section Chief) /s/ Carol O'Bryan			Date 02/27/26	Time 1600

Controlled Unclassified Information//Basic

Controlled Unclassified Information//Basic



AIR OPERATIONS SUMMARY (ICS 220 WF)

1. Incident Name / Number			2. Date Prepared	3. Time Prepared	4. Prepared By
5. Sunrise	Sunset	Pumpkin Time	6. Shutdown	7. Operational Period - Date	8. Operational Period - Time

9. General Remarks, Safety Notes, Hazards, Air Operations Special Equipment, etc.	10. Helibase Information	11. Temp. Flight Restriction (TFR)
	Name:	NOTAM:
	Latitude:	Altitude:
	Longitude:	Frequency:
		Hours:

12. Extraction/Medevac Information			
	Medevac	Short-haul	Hoist
FAA#:			
Phone:			
Location:			
Capabilities			
Request Incident Personnel Extraction/Medevac Through:			

13. Incident Frequencies	RX	Tone	TX	Tone	AM/FM/Digital	14. Position	Name	Phone
A/A (TFR)						AOBD		
A/A Rotor						ASGS		
A/A Briefing/Handoff						HEBM		
A/G Primary						HLCO		
A/G Secondary								
A/G Tactical						UAO		
DECK								
TOLC								

15. Equipment/Supplies

16. HELICOPTERS						
FAA #	TYPE	Make/Model	Helibase	Start	Avail.	Remarks

17. AERIAL SUPERVISION: AIR ATTACK/HELICOPTER COORDINATOR						
FAA #	Call Sign	Make/Model	Base	Start	Avail.	Remarks

18. UNMANNED AIRCRAFT SYSTEMS (UAS)							
Identifier	Cat./ Type	Make/ Model	Location	Start	Avail.	Leader/ Contact	Remarks

ZONE 07: Angelina-Sabine Fire							5/1/2016
CH	Name (8 Digits)	RX	RX TONE	TX	TX TONE	BAND	ASSIGNMENT
1	ANG DIR	172.2250	100.0	172.2250	100.0	N	Angelina Direct
2	ANG RPT	172.2250	100.0	164.8250	100.0	N	Angelina Repeater
3	VFIRE21	154.2800	156.7	154.2800	156.7	N	VFIRE21 Interoperability
4	SAB DIR	171.5000	100.0	171.5000	100.0	N	Sabine Direct
5	SAB RPT	171.5000	100.0	164.8000	100.0	N	Sabine Repeater
6	HXLY RPT	171.5000	100.0	164.8000	123.0	N	North Sabine Huxley Repeater
7	TAC A	159.4350	114.8	159.4350	114.8	N	TFS Tactical A (Alpha)
8	TAC B	151.4750	114.8	151.4750	114.8	N	TFS Tactical B (Bravo)
9	TAC C	159.3150	114.8	159.3150	114.8	N	TFS Tactical C (Charlie)
10	COMPACT	159.2850	0.0	159.2850	0.0	N	Southern Compact
11	TXF T1	168.6750	0.0	168.6750	0.0	N	TXF Tactical 1
12	R8 FIRE	166.5625	0.0	166.5625	0.0	N	R8 FIRE
13	FS A/G 7	166.8500	0.0	166.8500	0.0	N	FS Air-to-Ground 7
14	FS A/G 40	167.4500	0.0	167.4500	0.0	N	FS Air-to-Ground 40
15	TFS A/G 1	159.3000	114.8	159.3000	114.8	N	TFS Air-to-Ground 1
16	AIRGUARD	168.6250	0.0	168.6250	110.9	N	AIR GUARD

ZONE 01: Forest Wide							5/1/2016
CH	Name (8 Digits)	RX	RX TONE	TX	TX TONE	BAND	Assignment
1	ANG RPT	172.2250	100.0	164.8250	100.0	N	Angelina Repeater
2	DC NORTH	170.5750	114.8	164.1500	127.3	N	Davy Crockett North Repeater
3	DC SOUTH	170.5750	114.8	164.1500	114.8	N	Davy Crockett South Repeater
4	DC TICC	170.5750	114.8	164.1500	103.5	N	Davy Crockett TICC Repeater
5	SAB RPT	171.5000	100.0	164.8000	100.0	N	Sabine Repeater
6	HXLY RPT	171.5000	100.0	164.8000	123.0	N	North Sabine Huxley Repeater
7	CADO RPT	170.5750	123.0	164.1500	123.0	N	Caddo Repeater
8	LBJ DIR	172.2250	114.8	172.2250	114.8	N	LBJ Direct
9	LBJ RPT	172.2250	114.8	164.8250	114.8	N	LBJ Repeater
10	SH DIR	171.5000	110.9	171.5000	110.9	N	Sam Houston Direct
11	SH EAST	171.5000	110.9	164.8000	136.5	N	Sam Houston Repeater E
12	SH WEST	171.5000	110.9	164.8000	110.9	N	Sam Houston Repeater W
13	CMNUSR1	163.7125	0.0	163.7125	0.0	N	Common Use Travel or Work
14	TXF T1	168.6750	0.0	168.6750	0.0	N	TXF Tactical 1
15	R8 FIRE	166.5625	0.0	166.5625	0.0	N	R8 Fire Tactical
16	AIRGUARD	168.6250	0.0	168.6250	110.9	N	AIR GUARD

[illegible]

MEDICAL PLAN (ICS 206)

1. Incident Name: Cypress Creek Fire	2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____						
3. Medical Aid Stations: Record on-site medical personnel, location, equipment, and frequency							
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ 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	☐ ALS ☐ BLS				
Air	Coordinate with Lufkin Dispatch or County	See attached list	☐ ALS ☐ BLS				
	*See attached list for County contact info		☐ ALS ☐ BLS				
			☐ ALS ☐ 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			☒ Yes Level: <u>1</u>	☒ Yes ☐ No	☒ Yes ☐ No
LSU Health Shreveport	1501 Kings Hwy, Shreveport, LA N 32.481656 W 93.760804	318-675-6850			☒ Yes Level: <u>1</u>	☒ Yes ☐ No	☒ Yes ☐ No
Nacogdoches Memorial Hospital	1204 N Mounds St, Nac., TX N 31.612701 W 94.647608	936-564-4611			☒ Yes Level: <u>3</u>	☐ Yes ☒ No	☒ Yes ☐ No
CHI St Lukes Health Memorial	1201 W Frank Ave, Lufkin, TX N 31.336253 W 94.741182	936-631-6789			☒ Yes Level: <u>4</u>	☐ Yes ☒ No	☒ Yes ☐ No
					☐ Yes Level: <u> </u>	☐ Yes ☐ No	☐ Yes ☐ No
6. Special Medical Emergency Procedures: -Provide First Aid and gather information for Medical Incident Report -Contact Lufkin Dispatch or 911/County Dispatch -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							
☐ Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.							

COUNTY SHERIFF'S DEPARTMENT

Angelina NF

Angelina	936-634-3331
Jasper	409-384-5417
San Augustine	936-275-2424
Nacogdoches	936-560-7777

Davy Crockett NF

Houston	936-544-2862
Trinity	936-642-1424

Sabine NF

Sabine	409-787-2266
Jasper	409-384-5417
San Augustine	936-275-2424
Newton	409-379-3636
Shelby	936-598-5600

Sam Houston NF

San Jacinto	936-653-4367
Montgomery	936-760-5871
Walker	936-435-2400
Conroe EMS	936-441-6243
PHI Life Flight	800-321-9522 dispatch

Caddo/LBJ Grasslands

Wise	940-627-5971
Fannin	903-583-2143 Ext 2500
Montague	940-894-2871

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	☐ 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> ☐ 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> ☐ 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		Brief Summary of Injury or Illness (<i>Ex: Unconscious, Struck by Falling Tree</i>)
Transport Request		Air Ambulance / Short Haul/Hoist Ground Ambulance / Other
Patient Location		Descriptive Location & Lat. / Long. (WGS84)
Incident Name		Geographic Name + "Medical" (<i>Ex: Trout Meadow Medical</i>)
On-Scene Incident Commander		Name of on-scene IC of Incident within an Incident (<i>Ex: TFLD Jones</i>)
Patient Care		Name of Care Provider (<i>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.