

# Luray Complex

**211 West/Waterfall Fire  
Shenandoah Forest/Waterfall Fire  
Serenity Ridge/Edith Gap Fire**


## **INCIDENT ACTION PLAN**



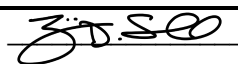
**March 26, 2024**

**Day Shift: 0800 - 2000  
Night Shift: 2000 - 0800**

# INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b> Luray Complex	<b>2. Operational Period:</b>	Date From: 3/26/2024 Time From: 0800	Date To: 3/26/2024 Time To: 2000											
<b>3. Objective(s):</b> <ul style="list-style-type: none"><li>• Ensure firefighter and public safety by using strategies and tactics that mitigate known and anticipated hazards while providing for the highest probability of success.</li><li>• Minimize impact to communities, infrastructure, public, and private lands.</li><li>• Limit acreage burned through direct and indirect suppression tactics.</li><li>• Utilize minimum impact suppression tactics to limit negative impacts to highly valued resources and assets.</li><li>• Manage costs to keep them commensurate with the values at risk.</li></ul>														
<b>4. Operational Period Command Emphasis:</b> <ul style="list-style-type: none"><li>• Utilize aircraft where appropriate and can be most effective. • Continue to scout primary and secondary contingency lines.</li><li>• Continue to look for opportunities to limit fire footprint utilizing natural and manmade features.</li><li>• Provide point protection to structures within the fire footprint.</li><li>• Stop, think, discuss, then act and ensure LCES is in place prior to engaging the fires</li></ul>														
General Situational Awareness LCES; steep and rocky terrain...watch footing and heads up for rolling rocks. Heavy snag density and fire weakened green trees...know your work area. Identify and avoid, or eliminate, hazard trees. Aviation operations...clear areas near bucket work. Use spotters when backing vehicles, and exercise care when navigating mountain roads.														
<b>5. Site Safety Plan Required?</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Approved Site Safety Plan(s) Located at:</b> _____														
<b>6. Incident Action Plan</b> (the items checked below are included in this Incident Action Plan): <table><tr><td><input type="checkbox"/> ICS 203</td><td><input type="checkbox"/> ICS 207</td><td rowspan="5"><u>Other Attachments:</u> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____</td></tr><tr><td><input type="checkbox"/> ICS 204</td><td><input type="checkbox"/> ICS 208</td></tr><tr><td><input type="checkbox"/> ICS 205</td><td><input type="checkbox"/> Map/Chart</td></tr><tr><td><input type="checkbox"/> ICS 205A</td><td><input type="checkbox"/> Weather Forecast/Tides/Currents</td></tr><tr><td><input type="checkbox"/> ICS 206</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"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> ICS 204	<input type="checkbox"/> ICS 208	<input type="checkbox"/> ICS 205	<input type="checkbox"/> Map/Chart	<input type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/> ICS 206	<input type="checkbox"/> _____
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<input type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather Forecast/Tides/Currents													
<input type="checkbox"/> ICS 206	<input type="checkbox"/> _____													
<b>7. Prepared by:</b> Name: Zoë Sumrall	Position/Title: PSC3t	Signature: 												

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> Luray Complex		<b>2. Operational Period:</b> Date From: 3/26/2024 Date To: 3/26/2024 Time From: 0800 Time To: 2000		
<b>3. Incident Commander(s) and Command Staff:</b>		<b>7. Operations Section:</b>		
IC/UCs	Jack Kauffman	Chief	Matt Wolasnki	
		Deputy		
Deputy		Staging Area		
Safety Officer	Chad Stover	<b>Branch</b>	211 West/Shenandoah Forest/Waterfall	
Public Info. Officer	Jon Perry	Branch Director		
Liaison Officer		Deputy		
<b>4. Agency/Organization Representatives:</b>		Division/Group	Shenandoah Forest	Cole Young
Agency/Organization	Name	Division/Group		
Page County EM	Matt Cronin	Division/Group		
		Division/Group		
		Division/Group		
		<b>Branch</b>	Serenity Ridge/Edith Gap	
		Branch Director		
		Deputy		
<b>5. Planning Section:</b>		Division/Group	Serenity Ridge	Cain Harbison
Chief	Jason Braunstein, Zoë Sumrall (t)	Division/Group		
Deputy		Division/Group		
Resources Unit	Zoë Sumrall	Division/Group		
Situation Unit		Division/Group		
Documentation Unit		<b>Branch</b>		
Demobilization Unit		Branch Director		
Technical Specialists		Deputy		
		Division/Group		
		Division/Group		
		Division/Group		
<b>6. Logistics Section:</b>		Division/Group		
Chief	Patti Nylander	Division/Group		
Deputy		<b>Air Operations Branch</b>		
<b>Support Branch</b>		Air Ops Branch Dir.		
Director				
Supply Unit				
Facilities Unit		<b>8. Finance/Administration Section:</b>		
Ground Support Unit		Chief		
<b>Service Branch</b>		Deputy		
Director		Time Unit		
Communications Unit		Procurement Unit		
Medical Unit		Comp/Claims Unit		
Food Unit		Cost Unit		
<b>9. Prepared by:</b> Name: Zoë Sumrall		Position/Title: PSC3t Date/		Signature: 
ICS 203	IAP Page	Time: 3/25/24 @ 1800		

.DISCUSSION...

High pressure will remain to the north through Tuesday as temperatures warm closer to normal, in the upper 50s to low 60s. No significant fire weather concerns through Thursday as humidity gradually increases. A slow moving cold front will bring increasing rain chances late Tuesday night through Thursday afternoon, with a wetting rain likely.

Min RH values Tuesday afternoon will drop to around 40-45 percent for a few hours, then quickly rebound Tuesday night into Wednesday as rain showers cross the area.

Southeast winds around 10 mph each afternoon through Wednesday, with occasional gusts to 15-20mph possible. Light and variable winds at times each night. Winds turn northwest behind the cold front Thursday morning, gusting 20-25mph Thursday afternoon into Thursday night.

Poor to fair smoke dispersion Tuesday, becomes poor on Wednesday due to shower activity and light transport winds. Dispersion is likely to improve Thursday, and even more so on Friday.

Dry, windy conditions possible on Friday, with minimum RH values approaching critical values. Any elevated fire weather conditions will be dependent on how much rain falls mid week.

.TUESDAY...

Sky/weather.....Mostly cloudy (75-85 percent). Slight chance of rain late in the afternoon.

CWR.....10 percent increasing to 20 percent late in the afternoon.

Max temperature.....Around 61.

Min humidity.....47 percent.

Wind (20 ft).....Light winds becoming south 5 to 8 mph in the afternoon.

Mixing height.....1800 ft AGL.

Transport winds.....Southeast 3 to 8 mph shifting to the south 10 to 13 mph late in the morning.

Smoke dispersal.....Poor (600 knot-ft) early in the morning increasing to fair (17900 knot-ft) in the afternoon.

Eye level winds.....Light winds becoming south up to 5 mph in the afternoon.


TIME (EDT)	8 AM	10 AM	NOON	2 PM	4 PM
Sky (%).....	76	81	84	84	84
Weather cov.....				S CHC	S CHC
Weather type....	NONE	NONE	NONE	RAIN	RAIN
Tstm cov.....					
CWR.....	0	0	10	20	20
Temp.....	33	42	52	58	59
RH.....	82	67	54	47	47
20 ft wind.....	SE 3	S 3	S 5	S 7	S 8
20 ft wind gust..	5	5	6	8	9
Eye level wind..	SE 2	S 2	S 3	S 4	S 5
Eye lvl wnd gst..	3	3	4	5	
Mix hgt (ft)....	200	1000	1600	1800	1700
Transport wind..	SE 3	SE 10	S 13	S 10	SE 12
Vrate kt-ft/1K..	1	9	18	16	17
Ventrte Cat....	POOR	POOR	POOR	POOR	POOR

.TUESDAY NIGHT...

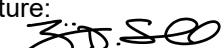
Sky/weather.....Mostly cloudy (75-85 percent). Slight chance of rain early in the evening, then chance of rain early in the evening.



## ASSIGNMENT LIST (ICS 204)

<b>1. Incident Name:</b> Luray Complex		<b>2. Operational Period:</b> Date From: 3/26/2024 Date To: 3/26/2024 Time From: 0800 Time To: 2000		<b>3.</b> Branch: Shenandoah Forest/Waterfall Division: Group: Staging Area: Luray, Cooter's Place	
<b>4. Operations Personnel:</b>		<u>Name</u>	<u>Contact Number(s)</u>		
Operations Section Chief:		Matt Wolanski	540-331-8999		
Branch Director:					
Division/Group Supervisor:		Cole Young	540-491-3013		
<b>5. Resources Assigned:</b>			<b># of Persons</b>	<b>Contact (e.g., phone, pager, radio frequency, etc.)</b>	<b>Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information</b>
<b>Resource Identifier</b>	<b>Leader</b>				
Eastern Region Hand Crew	Stephen Jasenak	5	434-329-0056		
E-606	Mike Mohr	1	540-671-5534		
E-612	Heather Rosser	2	804-317-3737		
	Lauren Charles		434-235-3977		
FFT2	Connor Goolsby	1	434-365-8225		
FFT2	Dalton Brown	1	434-995-8145		
AB50	Ian Morris	1	434-547-9141		
RAP30					
<b>6. Work Assignments:</b> Conduct 100% mop-up around homes. Improve and hold existing lines. Scout for opportunities for control lines to prevent fire spread. Base all actions considering firefighter safety and values at risk.					
<b>7. Special Instructions:</b>  AB50 - water bar on Burner Gap Trail Engines - Patrol and mop up in Shenandoah/Massanutten Forest ER crew with RAP30 - Patrol High Pines to St. Johns. - Check line along fields above 211					
<b>8. Communications</b> (radio and/or phone contact numbers needed for this assignment):					
<b>Name</b>	<b>/Function</b>	<b>Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</b>			
CMD Stars Central Fire 1	/				
TAC DIR CH7	/				
Interop: DIR CH12 Compact /					
County: OPS 5 /					
<b>9. Prepared by:</b> Name: Zoë Sumrall		Position/Title: PSC3t		Signature: 	

## ASSIGNMENT LIST (ICS 204)

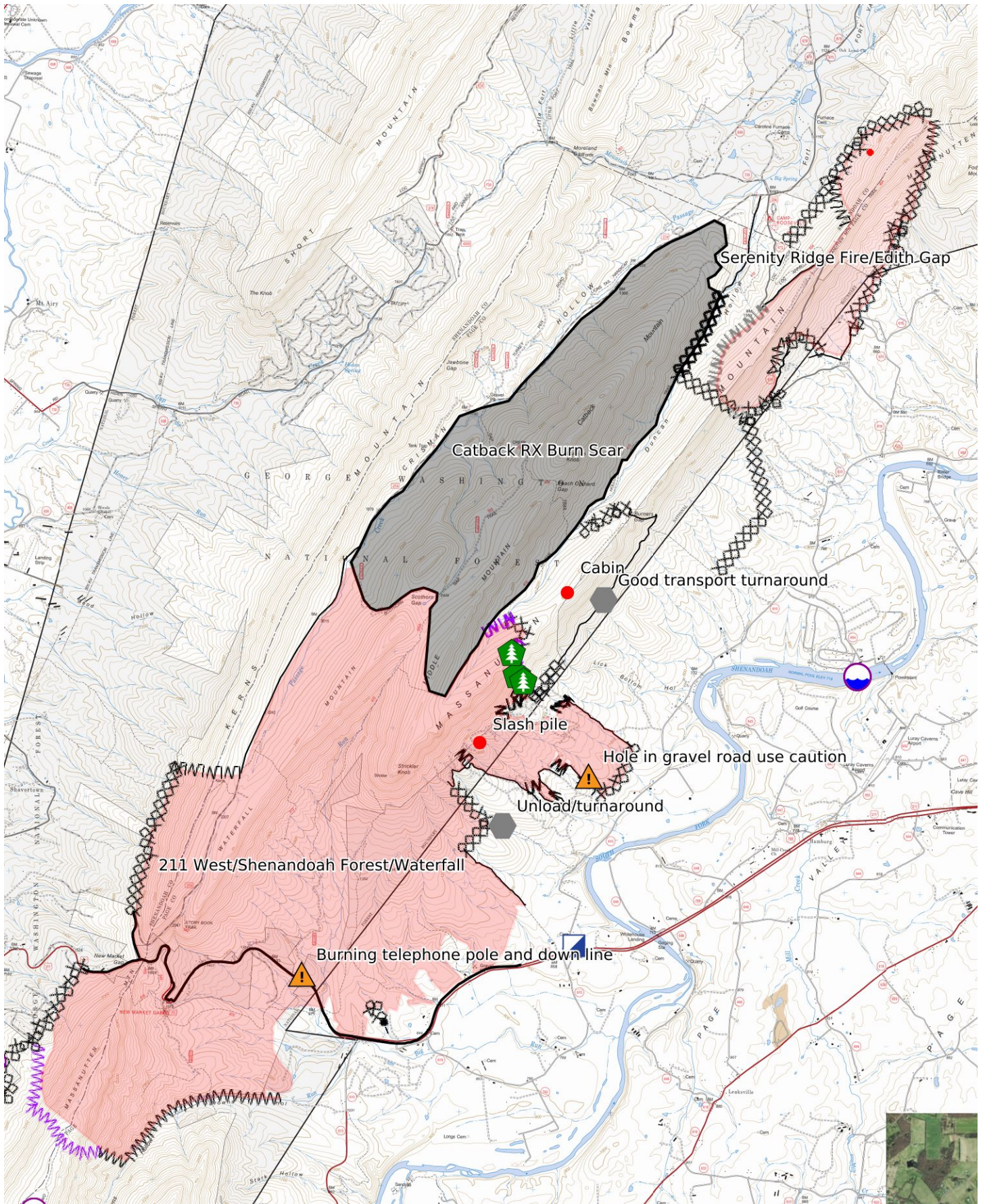
<b>1. Incident Name:</b> Luray Complex		<b>2. Operational Period:</b> Date From: 3/26/2024 Date To: 3/26/2024 Time From: 0800 Time To: 2000		<b>3.</b> Branch: Division: Serenity Ridge/Edith Gap Group: Staging Area: Luray, Cooter's Place	
<b>4. Operations Personnel:</b>		<u>Name</u>	<u>Contact Number(s)</u>		
Operations Section Chief:		Matt Wolanski	540-331-8999		
Branch Director:					
Division/Group Supervisor:		Cain Harbison	540-333-8160		
<b>5. Resources Assigned:</b>			<b># of Persons</b>	<b>Contact (e.g., phone, pager, radio frequency, etc.)</b>	<b>Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information</b>
<b>Resource Identifier</b>	<b>Leader</b>				
E-609	John Rose	2	757-346-8149		
	Evan Slabach		276-455-6932		
FFT2	Justin Wightman	1	540-335-0612		
Western Region Hand Crew	Nick Perkins	12	276-768-8826		
<b>6. Work Assignments:</b> Conduct 100% mop-up around homes. Improve and hold existing lines. Scout for opportunities for control lines to prevent fire spread. Finish check line on northwest fire edge. Base all actions considering firefighter safety and values at risk.					
<b>7. Special Instructions:</b>					
<b>8. Communications</b> (radio and/or phone contact numbers needed for this assignment):					
Name		/Function		Primary Contact: indicate cell, pager, or radio (frequency/system/channel)	
CMD Stars Central Fire 1		/			
TAC DIR CH5		/			
Interop: DIR CH12 Compact		/			
County: OPS 2		/			
<b>9. Prepared by:</b> Name: Zoë Sumrall			Position/Title: PSC3t		Signature: 

**Luray Complex**

**DOF Zone 1 in BKR5000**

Incident Radio Communication Plan			Incident Name:		Date Time Prepared:	Operational Period Date/Time:
			Luray Complex		03/25/2024 @ 2000	03/26/2024 0600-2000
Ch #	Function:	Frequency:	Tone:	Mode:	Assignment:	Notes:
1	<b>DIR 1</b>	RX: 151.1900	100.0	A	Unassigned	
		TX: 151.1900	100.0			
2	<b>DIR 2</b>	RX: 151.4750	100.0	A	Unassigned	
		TX: 151.4750	100.0			
3	<b>DIR 3</b>	RX: 159.3600	100.0	A	211 West Structure Group	
		TX: 159.3600	100.0			
4	<b>DIR 4</b>	RX: 159.4650	100.0	A	Unassigned	
		TX: 159.4650	100.0			
5	<b>DIR 5</b>	RX: 171.4250	100.0	A	Serenity Ridge Structure Group	
		TX: 171.4250	100.0			
6	<b>DIR 6</b>	RX: 170.4750	100.0	A	Unassigned	
		TX: 170.4750	100.0			
7	<b>DIR 7</b>	RX: 172.2750	100.0	A	Shenandoah Forest Structure Group	
		TX: 172.2750	100.0			
8	<b>DIR 8</b>	RX: 151.4975	100.0	A	Unassigned	
		TX: 151.4975	100.0			
9	<b>DIR 9</b>	RX: 158.8725	100.0	A	Unassigned	
		TX: 158.8725	100.0			
10	<b>DIR 10</b>	RX: 159.0225	100.0	A	Unassigned	
		TX: 159.0225	100.0			
11	<b>DOF A/G</b>	RX: 159.0450	100.0	A	Primary Air to Ground	
		TX: 159.0450	100.0			
12	<b>COMPACT</b>	RX: 159.2850		A	SE Compact	Interoperability With Federal Agencies
		TX: 159.2850				
13	<b>VFIRE 21</b>	RX: 154.2800	156.7	A	Unassigned	Mutual Aid With VFD
		TX: 154.2800	156.7			
14	<b>VFIRE 22</b>	RX: 154.2650	156.7	A	Unassigned	Mutual Aid With VFD
		TX: 159.0450	156.7			
15	<b>VFIRE 23</b>	RX: 154.2950	156.7	A	Unassigned	Mutual Aid With VFD
		TX: 1542950	156.7			
16	<b>Central Fire 1</b>	RX:		D	Command Channel Back To ICP	STARS Radios Only
		TX:				
Prepared by: Keith Brown-DOF (COML)				<b>NWCG - ICS 205</b>		





Serenity Ridge Fire/Edith Gap

Catback RX Burn Scar

Cabin  
Good transport turnaround

Slash pile

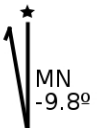
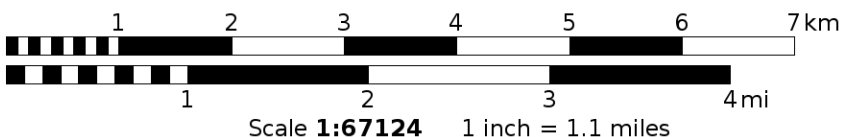
Hole in gravel road use caution

Unload/turnaround

211 West/Shenandoah Forest/Waterfall

Burning telephone pole and down line

Mercator Projection  
WGS84  
UTM Zone 17S  
 CALTOPO



# SAFETY MESSAGE/PLAN (ICS 208)

<b>1. Incident Name:</b> Luray Complex	<b>2. Operational Period:</b>	Date From: 3/26/2024 Time From: 0800	Date To: 3/26/2024 Time To: 2000
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**3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:**

## CUMULATIVE FATIGUE

Everyone has worked long hours over multiple days.

**Behavioral indicators:**

- Decreased motivation and low morale.
- Increased irritability and depression.

**Physiological indicators:**

- Confusion, poor problem-solving.
- Poor abstract thinking.
- Poor attention/decisions.
- Poor concentration/memory.
- Extreme emotional responses.
- Social/behavioral changes.

**Recommendations for chronic fatigue/stress are:**

- Take longer periods of rest/recovery.
- Ensure that workers are adequately rested before they begin work shifts.
- Provide periodic rest breaks to allow physical and mental recovery.
- Alternate between heavy and light tasks.
- Eat well-balanced meals regularly, with energy supplements during periods of high exertion.
- Maintain hydration.
- Ensure workers maintain good personal hygiene.
- Maintain high standards of physical fitness and work capacity.
- In extreme cases, personnel may need to be relieved of their duties.

**4. Site Safety Plan Required?** Yes  No

**Approved Site Safety Plan(s) Located At:**

<b>5. Prepared by:</b> S	Name: C. STOVER Position/Title: SOFC(t)	Signature: _____
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## MEDICAL PLAN (ICS 206)

<b>1. Incident Name:</b> Luray Complex		<b>2. Operational Period:</b>		Date From: 3/26/2024 Time From: 0800	Date To: 3/26/2024 Time To: 2000		
<b>3. Medical Aid Stations:</b>							
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?				
Luray VFD	25 Memorial Drive Luray, Va. 22835	911 540-743-5585	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Stanley VFD	933 West Main Street Stanley, Va. 22851	911 540-778-7728	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
SNP LEO	SHEN	540-999-3422	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
			<input type="checkbox"/> Yes <input type="checkbox"/> No				
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
			<input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>4. Transportation (indicate air or ground):</b>							
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service				
Pegasus MedCom	University of Virginia Charlottesville, Va. 22903	800-552-1826 434-924-9287	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS				
PHI Air Medical – AirCare5	43 Aviation Circle Suite 103 Weyers Cave, Va. 24486	1-800-258-8181	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS				
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS				
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS				
<b>5. Hospitals:</b>							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/ Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
Page Memorial	200 Memorial Drive Luray, Va. 22835	540-743-4561	10	30	<input type="checkbox"/> Yes Level: ____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Rockingham Memorial	2010 Health Campus Drive Harrisonburg, Va. 22801	540-689-1000	15	60	<input type="checkbox"/> Yes Level: ____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
UVA Hospital	1215 Lee Street Charlottesville, Va	434-924-3627	25	75	<input checked="" type="checkbox"/> Yes Level: ____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
VCU Medical Center	1250 E Marshall St Richmond, Va. 23219	804-828-9000	35	110	<input checked="" type="checkbox"/> Yes Level: ____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Chippenham Hospital	7101 Jahnke Road Richmond, Va.	804-483-0000	35	110	<input type="checkbox"/> Yes Level: ____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>6. Special Medical Emergency Procedures:</b>							
<p>Notify injured party's fireline supervisor of injuries/illness. Fireline supervisor will notify IC</p> <p>Nearest qualified EMT or first responder will provide care and assess the injury/incident</p> <p>With serious illness/injury, initiate a Medical Incident Report (ICS 206)</p> <p>All accidents, injuries, and near misses will be reported immediately to your supervisor</p> <p><input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.</p>							

# 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"/> <b>RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE</b> <i>Ex: Unconscious, difficulty breathing, bleeding severely, 2° – 3° burns more than 4 palm sizes, heat stroke, disoriented.</i> <input type="checkbox"/> <b>YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary.</b> <i>Ex: Significant trauma, unable to walk, 2° – 3° burns not more than 1-3 palm sizes.</i> <input type="checkbox"/> <b>GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport</b> <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 &amp; 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.