

**PURPOSE:**

To ensure that the condition of all personnel operating at the scene of an emergency do not deteriorate to a point which affects their own or any other person's safety, especially those involving an IDLH atmosphere, long work periods, extreme exertion, and/or extreme weather conditions.

**PROCEDURE:**

- 1. The Incident Commander (IC) or the Safety Officer (SO) will be responsible for evaluation the conditions of an incident and determining the need to establish an incident support/rehabilitation (Rehab) area for personnel.**
  - A. If the IC or SO feels the conditions will in any way cause harm in the safe, efficient performance of response personnel, Rehab shall be considered.
  - B. Rehab should be considered after personnel go through two SCBA bottles.
  - C. All personnel are expected to maintain awareness of personal limitations and/or conditions and report, to their officer, any changes that may affect their ability to function effectively and safely.
  - D. Rehab shall be located to provide for environmental protection and be a space large enough to handle the needs of the incident.
- 2. Incident Support (Generally 1<sup>st</sup> and 2<sup>nd</sup> alarms)**
  - A. Personnel will enter and undergo an initial medical evaluation that will consist of a physical assessment including mental status. If appropriate manpower is available, baseline vital signs may be taken. All medical evaluations will be recorded on the Medical Evaluation Form.
  - B. Personnel will remain in incident support for a minimum of 10 minutes, during which time they shall be offered nutritional support, rehydration, and relief from environmental conditions.
- 3. REHAB (Generally 3<sup>rd</sup> alarm and larger)**
  - A. Personnel entering REHAB will receive the above treatment as well as more detailed medical treatment.
  - B. Medical treatment or a resting period will be determined according to the following triage criteria based on entry findings:
    - I. Findings mandating that the individual be transferred to the Medical Unit:

- a. Any chest pain, shortness of breath or serious injury.
  - b. Altered mental status (confusion, dizziness, weakness, loss of consciousness).
  - c. Nausea, vomiting, tingling sensation in extremities.
  - d. Skin pallor, hot in temperature and either moist or dry and flushed.
  - e. Any complaint of unusual symptoms.
  - f. Irregular pulse.
  - g. Heart Rate >120 and Temperature >101°F and symptomatic.
  - h. Blood Pressure >160 or <100 systolic, or >100 diastolic and symptomatic.
- II. If initial exam findings include any of the following the individual will require reassessment within 10 minutes:
- a. Temperature >101°F, regardless of other vital signs.
  - b. Heart Rate >120.
  - c. Systolic BP <100 or >160.
  - d. Diastolic BP >100.
- III. If reassessment exam findings include any of the following, the individual will require an additional reassessment in 10 minutes:
- a. Temperature >101°F, regardless of other vitals.
  - b. Heart Rate >120
  - c. Systolic BP <100 or >160.
  - d. Diastolic BP >100.
- IV. If, after an additional 10 minutes (20 minutes total in Rehab), reassessment exam findings include any of the following, the individual will be sent to the Medical Unit for further evaluation and/or treatment:
- a. Temperature >101°F, regardless of other vitals.
  - b. Heart Rate >120.
  - c. Systolic BP <100 or >160.
  - d. Diastolic BP >100.

- V. Exam findings allowing an individual to enter staging for reassignment include
  - a. Temperature <101°F.
  - b. Heart Rate <100.
  - c. Systolic BP 100-160.
  - d. Diastolic BP <100.

