

Falmouth Fire-EMS Operating Guideline

Personnel Rehab at Emergency Incidents and Training

Objective:

To ensure that the physical and mental condition of employees operating at the scene of an emergency or a training exercise does not deteriorate to a point that it affects the safety of employees or that jeopardizes the safety and integrity of the operation.

General Information:

There is great evidence nationwide supporting the fact that far more firefighters die from heart attack and heat exhaustion related injuries than from trauma. Because of that, this SOG will cover ALL Fire-EMS staff relating to rehabilitation at emergency scenes to ensure that our personnel stay safe and properly rested and hydrated.

Guidelines:

- A. The REHAB GROUP is an area established by the Incident Commander during an incident or training where personnel receive necessary rest, nourishment, comfort, and medical evaluation to properly ready them for another work cycle. It is necessary for the effective safety monitoring of personnel.
 1. The Incident Commander should establish a REHAB GROUP when conditions indicate that rest and rehabilitation is needed for personnel operating at an incident scene. This should apply to emergency operations where strenuous physical activity or exposure to heat or cold exist.
 2. The Incident Commander shall consider the circumstances of each incident and make adequate provisions early in the incident for the rest and rehabilitation for all employees operating at the scene. These provisions may include medical evaluation, treatment and monitoring; food and fluid replenishment; mental rest; and relief from extreme climatic conditions and the other environmental parameters of the incident. The rehabilitation may include the provision of Emergency Medical Services.
 3. Rehabilitation should be considered by staff officers during the initial planning stages of an emergency response. However, the climatic or environmental conditions of the emergency scene should not be the sole justification for establishing a Rehabilitation Area. Any activity/incident that is large in size, long in duration,

and/or labor intensive will rapidly deplete the energy and strength of personnel and therefore merits consideration for rehabilitation.

4. Companies should be sent to REHAB as a company and remain together in Rehab. When the company has been released from REHAB, the company officer will notify the Staging/Resource Officer (or Incident Commander in the absence of a Staging/Resource Officer) that they have been released from Rehab.

B. CALLING FOR REHAB:

1. When Rehab is called for, the following guidelines shall be followed:
 - a. The Incident Commander will advise the location where Rehab is to be established.
 - b. Command will assign a responding ambulance for Rehab. The preferred response for Rehab is one ambulance from which to perform the Rehab and one ambulance on stand-by for possible transport if needed from the scene. If an additional ambulance is needed, Command will request one. The Officer of the Ambulance will notify the Incident Commander once the Rehab Group has been established.
 - c. The individual designated as the Rehab Group Supervisor will report directly to the Incident Commander. Additional Units may be requested through the Incident Commander depending on the amount of medical care required in the Rehab Group.

C. REHAB GROUP SUPERVISOR RESPONSIBILITIES:

1. The Rehab Group Supervisor's responsibilities may include the monitoring and documentation of vital signs and general clinical appearance of firefighters sent to Rehab.
2. The parameters for determining the ability of firefighters to return to active suppression activities will be left to the discretion of the Rehab Group Supervisor. The guidelines should be consistent with those that would be used to determine the general welfare of any patient.
3. A base line should be established to determine the firefighter's improvement status. If any irregular signs are noted, proper

treatment should be initiated, and transportation provided by another Unit.

4. The Rehab Group will pay particular attention to the firefighter's heart rate and oral temperature.
5. After 10 minutes of rehabilitation, firefighters with pulse rates greater than 120 or oral temperature greater than 100.6 F, should remain in REHAB for continued evaluation.
6. Firefighters should be reassessed every 10 to 20 minutes and returned to firefighting duties once the heart rate and oral temperature return to normal limits.
7. Firefighters that maintain pulse rates greater than 120 or temperatures greater than 102.0 F for longer than 50 minutes should not return to firefighting activities and should be considered for an emergency facility evaluation.
8. The Rehab Group Supervisor will inform Command as soon as practical if there are any firefighters that need to be transported from the scene.
9. If an ambulance transports a patient from the scene Command may bring in another ambulance to be on stand-by from the scene.

These guidelines may be changed or altered by the Fire-EMS Chief at any time.