

On-Scene Rehabilitation

305.1 PURPOSE AND SCOPE

This document provides arrival and on-scene procedures for Euless Fire Department firefighter rehabilitation. This procedure should be implemented at all working fires, greater alarm emergencies or during extended operations.

Corresponding Policies:

Critical Incident Stress Debriefing
Heat Illness Prevention Program

305.2 FIRST FIVE MINUTES

#The Incident Commander (IC) should determine whether operational needs and/or weather conditions require the establishment of a formal rehabilitation group.

- Incident rehabilitation can be informal for routine incidents such as minor structure fires or small wildland fires. Informal rehabilitation is usually performed at the company level. The accountability system applies to both informal and formal rehabilitation.
- Rehabilitation should begin when emergency operations or training exercises pose a potential safety or health risk to members.
- The incident commander will notify fire alarm and request CERT Rehab be notified.

#During the 360 assessment and size-up, the IC should take notice of appropriate locations for rehabilitation operations.

- Potential locations for a formal rehabilitation group should be noted in the Initial Action Plan.
- The rehabilitation group should be outside the immediately dangerous to life and health (IDLH) area.

#Assign a rehabilitation officer, if required, as soon as resources permit.

- The IC is responsible for rehabilitation of members unless that duty is delegated to a rehabilitation officer.

#Call for any additional required resources.

- The IC or rehabilitation officer should call for rehabilitation resources, including emergency medical service (EMS) units dedicated to rehab, early in an incident to allow time for the resources to arrive and set up the formal rehabilitation location.

305.3 PROCEDURES

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305.3.1 RESOURCE DEPLOYMENT

A large scale, long duration or extreme weather incident will require the establishment of a formal rehabilitation group.

(a) Location

1. The rehabilitation group should be near the command post but not so close that the Rehab group interferes with the command post.
2. Primary considerations are:
 - Sufficient space to accommodate the number of personnel expected.
 - Sufficient space for a separate area to remove personal protective equipment (PPE).
 - Accessibility for EMS and ambulance(s).
 - Away from hazardous atmospheres including apparatus exhaust.
 - Uphill and upwind from any gross decontamination area.
 - Shaded in the summer and protected from inclement weather (cold/rain/snow).
 - Accessible to a water supply for hydration and cooling.
 - Away from spectators and media whenever possible.

(b) Personnel (Rehabilitation Team)

1. The rehabilitation team should have sufficient personnel to staff these functions:
 - (a) Rehabilitation officer to manage the group.
 - (b) Member assigned to accountability for rehab check in/check out.
 - (c) Provision of hydration and nourishment and warming or cooling aids as required.
 - (d) EMS personnel for vital sign monitoring.
 - (e) Critical Incident Stress Team (if required).
 - (f) The Rehab Group will consist of a minimum of two paramedics and auxiliary personnel as needed.

305.3.2 OPERATIONS

(a) Entry Point

1. When practicable, company officers should direct crews to rehab together.
2. Make an initial medical screening assessment for general signs and symptoms requiring treatment and an initial assessment of vital signs.
3. Remove PPE and provide clean-up/decontamination resources. Gross decontamination techniques should be employed before coming in contact with gear and equipment that has been involved in suppression operations or a hazardous materials response hot zone.

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4. If no further medical attention is required, direct crew members to hydration, replenishment and warming or cooling resources.
- (b) Hydration and Replenishment
1. In cold weather, water and sports drinks should be at room temperature.
 2. Members in rehab should:
 - Drink at least 8 ounces of fluid every 15 minutes.
 - Avoid carbonated or caffeinated drinks.
 - Cool down/warm up as determined by the elements.
- (c) Medical Treatment and Transport
1. EMS members assigned to rehab should:
 - (a) Provide a medical screening assessment and take vital signs including:
 - Temperature
 - Blood pressure
 - Respiratory rate
 - Pulse oximetry
 - (b) Treat members exhibiting signs or symptoms requiring further assessment, vital signs exceeding EMS protocols and/or symptoms of heat/cold stress.
 - (c) Treat minor injuries.
 - (d) Arrange for patient transfer to other EMS crews for medical transport as needed.
 - (e) Reassess each member's vital signs before return to duty.
- (d) Return to Duty and Reassignment
1. The Company Officer is responsible to make sure members and crews are properly hydrated, receive medical treatment if required, rest and medical clearance before return to duty or reassignment.
 2. The rehabilitation officer should be permitted to adjust the time frames depending on work or environmental conditions. Consideration should be given to maintaining an equal work/rest time ratio.
 3. A record of all members passing through rehabilitation should be maintained. The record should include:
 - Unit number.
 - Member name.
 - Vital signs.
 - Time in/time out for members entering or leaving rehab.

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- Disposition.

305.3.3 REHAB GROUP OFFICER RESPONSIBILITIES

(a) The Rehab Officer shall:

1. Don the Rehab Officer Vest
2. Whenever possible select a location for the rehab group according to the site characteristics.
 - Able to accommodate the number of personnel depending on the incident
 - Accessibility, ambulances, away from media
 - Safe Environment
 - Shade/shelter
 - Access to resources
3. Ensure personnel dress down by removing unnecessary PPE to affect cooling / warming as needed.
4. Ensure access to rehab supplies:
 - Water, medical equipment, food
 - Blankets and/or cooling as needed
 - Be familiar with the signs and symptoms of heat stress
5. Follow Rehabilitation log, i.e. monitoring, fluid intake, timing, etc...
6. Ensure personnel rehydrate themselves
7. Maintain strict accountability at all times.
8. Document members entering or leaving at all times.
9. Notify IC and EMS if a member needs EMS attention.

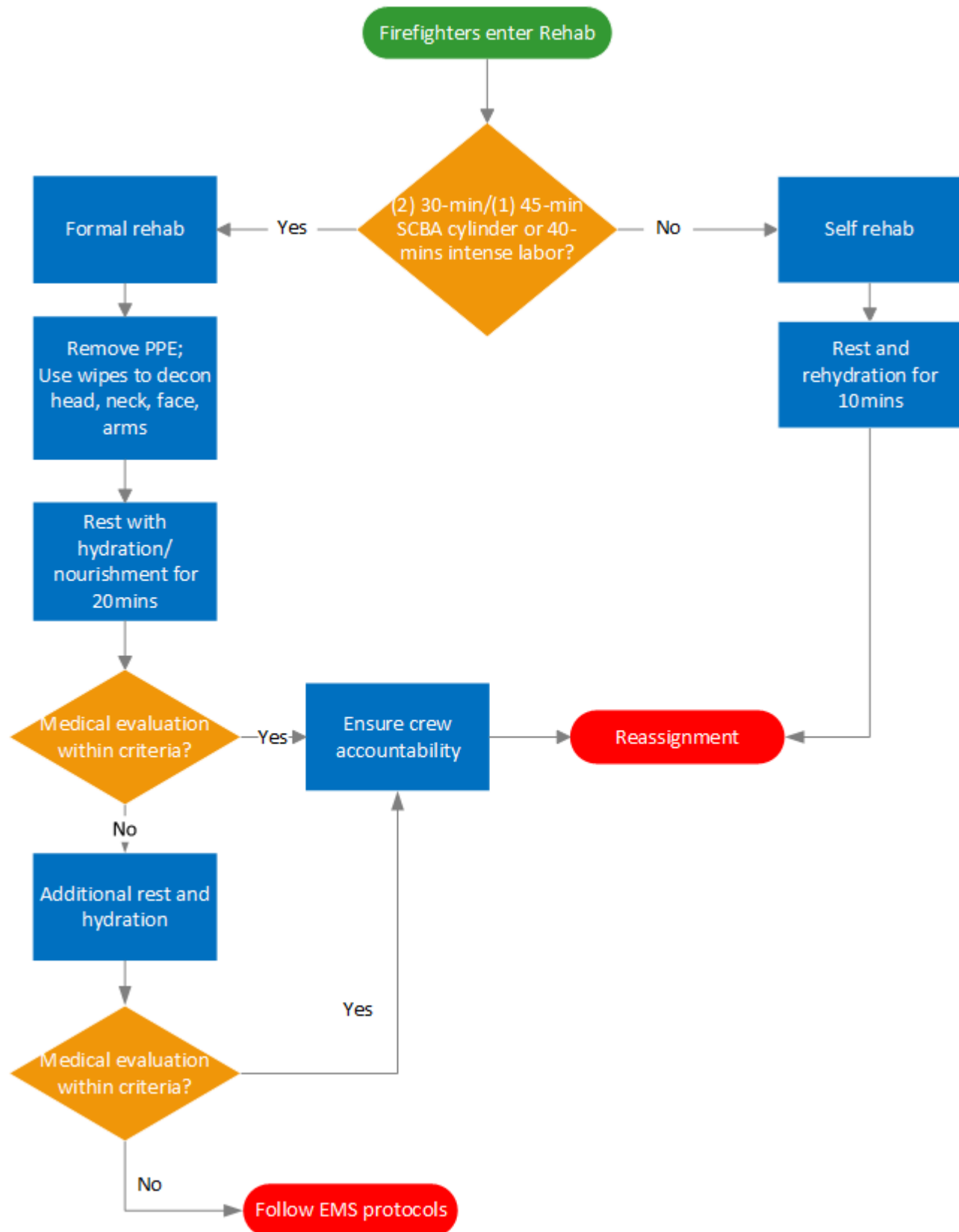
[See attachment: Formal Rehab Log](#)

305.4 UNIVERSAL PRACTICES

1. Company Officers should continually observe fellow crew members for conditions requiring rehabilitation.
2. All members should recognize the general signs and symptoms requiring further assessment and signs and symptoms of heat stress, cold stress and heat-related illness.

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305.5 PROCEDURE DECISION TREE



Eules Fire Department

Eules Fire Department Procedure Manual

On-Scene Rehabilitation

Attachments

Formal Rehab Log.pdf

Eules Fire Department
Formal Rehab Log

Incident Information

Date / / Incident Name

IC

Incident Type

☐ Structure Fire

☐ Wild land Fire

☐ SAR Incident

☐ Other:

Company Information

Company ID

Company Officer

Time Crew Assigned to Rehab

Reason Assigned to Rehab (Below)

☐ 2-30 Minute Bottles

☐ 45 Minute Strenuous Activity

☐ Minute Harsh Environment

☐ Personnel "Spent"

☐ 1- 45-60 minute bottle

☐ Training > 1 hr.

Initial Crew Rehab—10-15 minute (After 10-15min. eval. for Red Flags)

Crew Members

Time	Resting HR	Temp	B/P	SPO ₂ / CO	8 oz Fluid	Time (>10 min)	HR	Temp	B/P	SPO ₂ / CO	Time Cleared Rehab	Additional time required
:	:		/		<input type="checkbox"/>	:			/		:	<input type="checkbox"/>
:	:		/		<input type="checkbox"/>	:			/		:	<input type="checkbox"/>
:	:		/		<input type="checkbox"/>	:			/		:	<input type="checkbox"/>
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:	:		/		<input type="checkbox"/>	:			/		:	<input type="checkbox"/>

RED FLAGS ☐ HR 100 or >

☐ Temp 100.6 or >

☐ Systolic B/P >160 and/or Diastolic > 100

☐ SpO₂ < 92%

☐ CO >25%

☐ Medical HX

☐ Systolic <80

Extended Crew Rehab—20 Minutes

Crew Members

Time	Resting HR	Temp	B/P	SPO ₂ / CO	8 oz Fluid	Time (>10 min)	HR	Temp	B/P	SPO ₂ / CO	Time Cleared Rehab	Emergency Evaluation required
:	:		/		<input type="checkbox"/>	:			/		:	<input type="checkbox"/>
:	:		/		<input type="checkbox"/>	:			/		:	<input type="checkbox"/>
:	:		/		<input type="checkbox"/>	:			/		:	<input type="checkbox"/>
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Rehab Officer Signature: _____

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Eulless Fire Department Rehab Group Company Check-in/out Sheet

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