

Milepost 97 Fire
Object Strikes Crewmember
Rapid Lesson Sharing

July 29, 2019



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1. Narrative

Background

The Milepost 97 Fire began on July 24th as an uncontrolled fire alongside Interstate 5 near Canyonville, OR. On July 26th, an Incident Management Team (IMT) was delegated authority to suppress the fire. By July 29th, Milepost 97 Fire had grown to 11,668 acres, with 10% containment. Assigned as resources to the incident were 1,265 personnel, including 48 hand crews, 41 engines, 45 dozers, 14 water tenders, and 15 aircraft. Evacuation notices were issued to 3 homes; 586 structures were threatened. The fire weather forecast for the swing shift on July 29th had temperatures at 50-55 degrees, sustained winds of 5-9 miles per hour, and maximum relative humidity was near 64%. Spread of the fire was expected to be active, with continued growth, and torching and spotting would be a concern. During this operational period, an Interagency Hotshot Crew's (IHC) tactical mission was to continue burnout operations to Interstate 5 and around structures at Drop Point 5.

Incident

Shortly after midnight on July 29th, the IHC was facilitating a burnout operation on the west side of Interstate 5. The IHC made their way down a steep slope (35-40 degrees) by mid-sloping, using a cross slope grid. As the IHC was making their way down slope, an object that was neither identified nor heard – began rolling. The object ultimately struck one of the crew members in the head, behind the left ear and below the hard hat. This impact resulted in a fall and loss of consciousness. The IHC superintendent, who was observing burning operations on the opposite side of Interstate 5 from their position, noticed the object hit something, which was confirmed to be one of the crewmembers. As soon as the IHC confirmed that a person had in fact been struck and seriously injured, the IHC superintendent initiated an incident within an incident (IWI) and assumed the role of IWI-Incident Commander (IC).

Patient Extrication and Transport

Understanding the increased risk of injury associated with operations in steep terrain, a rapid extraction module (REM) and medics (with ambulance) were prepositioned in close proximity to the division. Once on scene, medical resources completed a patient assessment and had the IWI-IC request transportation by air through the IMT's Communication Unit. The injured crewmember was then loaded onto a stokes litter and extracted down the steep slope by method of 'human conveyor belt,' both 30 feet down and up to the awaiting ambulance. Once loaded, the ambulance departed for the helispot and prepared to transfer care to the inbound air ambulance. Upon arrival, the air ambulance received the patient, prepared for transport and departed the site for the medical center.

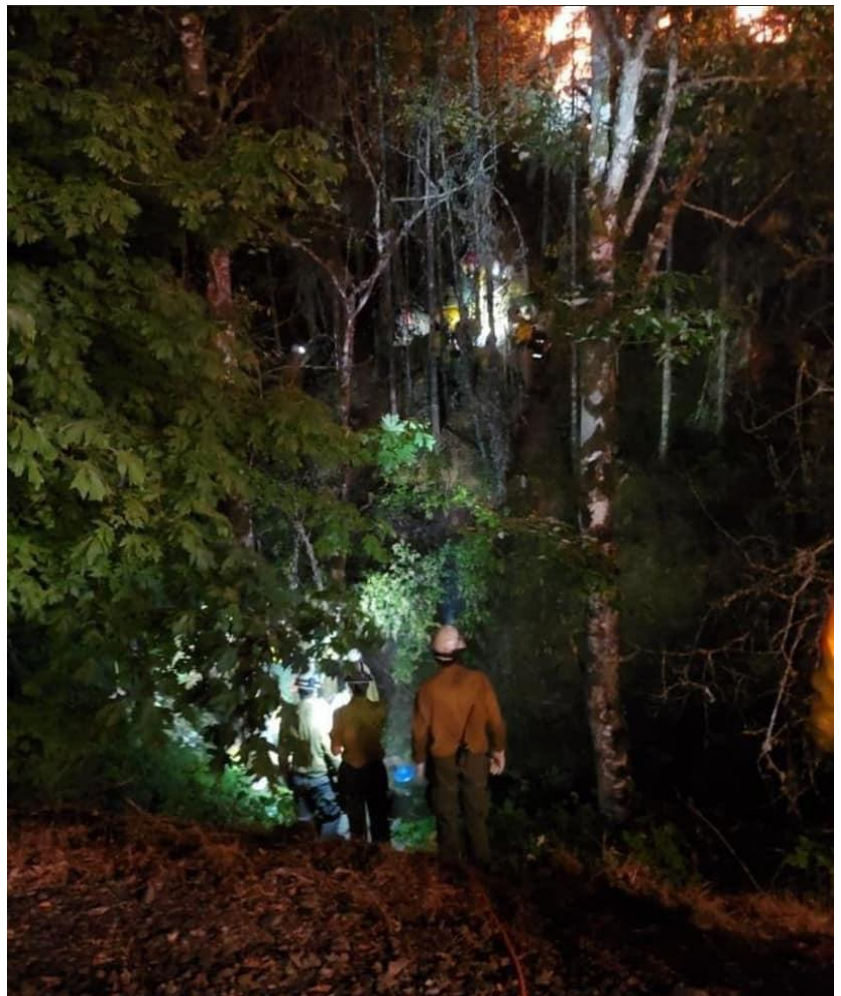


Photo taken as rescuers make their way both down and up slope 30 feet to the patients location. The fire in the foreground had been previously ignited by the hand crew during burnout operations.

2. Timeline Summary

June 29, 2019

- 1000** IHC began swing shift (1000-0200).
- 0038** Crewmember struck in the head by an object (assumed to be a rock) rolling downslope. Crewmember falls towards the downhill slope and loses consciousness, but is breathing.
- 0039** Incident within an incident is declared (IWI-IC established)
- 0041** Medic 2 & REM1 on scene.
- 0042** Air Ambulance contacted.
- 0044** IWI-IC updates with: patient is responding to verbal requests.
- 0050** Camp Medic arrives on scene.
- 0054** Patient in the ambulance, which was staged near the division, for further treatment by medics and transport.
- 0106** Ambulance arrives at the helispot; awaiting Air Ambulance.
- 0133** Air Ambulance on the ground at helispot. Patient transferred to Air Ambulance.
- 0148** Air Ambulance departs helispot for medical center.
- 0228** Patient arrives at hospital for advanced care.
- 0530** Following a thorough examination at the hospital, the crewmember was treated for injuries and released.

3. Things Done Well

- The crew transitioned from fire operations to accomplishing a medical response quickly. The 8-Line or Medical Incident Report (MIR) was used, the Rapid Extraction Module (REM) was notified and responded immediately, and everyone remained calm, which allowed for good, clear communication from the line.
 - The Communications unit at Incident Command Post (ICP) immediately transitioned to a medical response protocol: Radio operator #1 and #2 divided duties. While radio operator #1 talked and coordinated over the radio, radio operator #2 focused on documenting and tracking the next needed piece of information.
 - At the beginning of each shift, radio operators perform IWI scenarios, to include mapping resources and identifying the current location of medical assets.
 - The communications unit shared that the air ambulance pilot requested weather, fire conditions, and information on any other aircraft in the area during transit to the helispot.
- Knowing the crewmember had been injured by an object rolling down the hill, the crew mitigated additional injury by shielding the patient from other rollout debris.
- The IMT had an ambulance staged near the division, which resulted in a quick response from the injury site to the pre-determined helispot. Once the REM and crew completed the ‘conveyor belt’ method to transport the patient down and up the steep slopes, the ambulance was ready for transport from the site to helispot.
- The IWI – IC displayed an exceptional ability to communicate with the Communications unit given the adrenaline generated from the intensity of the situation. The crew believes the reason things went well is due to scenario based training for this type of incident. Also, the REM had been playing “what if” scenarios in their head prior to the event, which the REM believed was helpful when it was time to respond to this incident.
- Decision making by those involved was quick and accurate.

4. Lessons Learned (by IMT and Crew)

- 8-Line or MIR works well.

What they learned: The crew’s experience with the 8-Line or MIR was positive. Utilizing the MIR as a tool when you are in a high-tempo situation helps get all needed information relayed to the right people quickly.

- The crew has both experience and training with backboards, but was not familiar with the strapping process on a stokes litter. This created a little confusion when strapping in the crewmember under the conditions at that time.

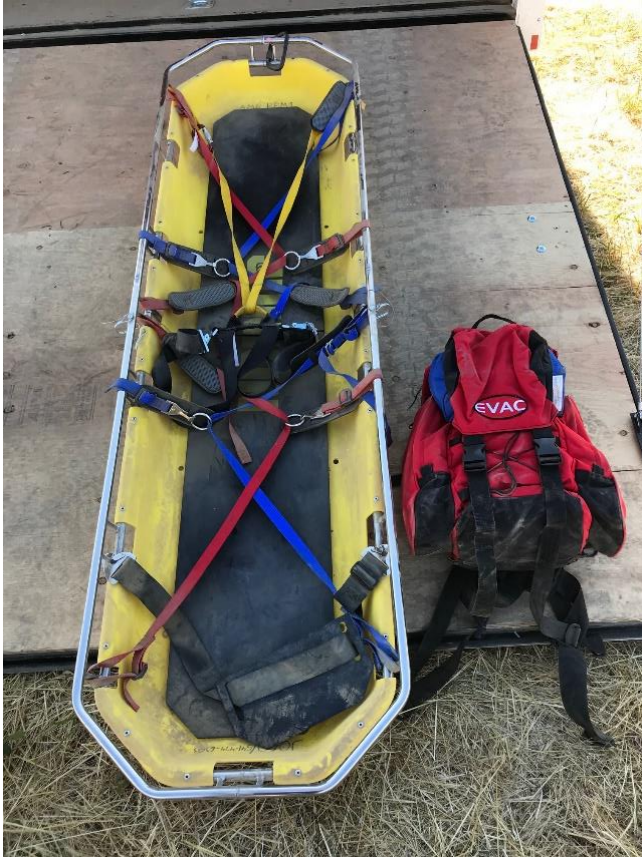


Photo of the stokes litter used for rescue.

What they learned: It would be valuable to expand scenario training to include some different types of rescue equipment. The strapping on a stokes litter isn't what one would consider 'user friendly'.

➤ Communications.

What they learned: While this did not affect the response, the Communications unit felt that dispatch numbers to area air ambulances, annotated by call order of priority for use, would add efficiency. This should be posted in the Communications unit trailer, and perhaps the IAP.

- The Airguard Frequency was not used by the responding Air Ambulance, so communication with fire resources on the ground during orbit and landing was not achieved. During the After Action Review, this was discussed and the IMT communicated with all resources that the Airguard frequency must be used by responding resources for communication with ground resources. In Region 6, if established frequencies do not work, the go to frequency for responding medical resources is Airguard.