

Rapid Lesson Sharing

Event Type: Short-Haul Extraction

Date: June 16, 2021

Location: Pinnacle Fire
Near Safford, Arizona

Short-Haul Extraction Success Story ***An Alignment of Pre-Planning, Availability of Resources, and Teamwork***

Summary of Incident

In a remote Division on the Pinnacle Fire, a crew was tasked with securing the fire's edge. A saw team was traversing a steep canyon. As the sawyer worked around a boulder the size of a small car, he brushed the boulder, setting it loose, and plummeting both the sawyer and the boulder down the canyon toward his swamper.

During his fall, the sawyer and boulder collided—smashing the sawyer's leg. He came to rest 35 feet down the hill. The swamper scrambled up the canyon to the sawyer just in time to see him lose consciousness.

This began a "Red Medical" at approximately 0900 in remote country on a day with temperatures predicted to reach 112 degrees (the Type 3 helicopter's temperature limitation).

Within one hour and 52 minutes, the sawyer was in an Air Ambulance headed to a Level 1 Trauma Center. By the end of that day, the sawyer was released from the hospital with a hairline fracture to the lower leg and serious bruising. Later, it was discovered that the sawyer's injuries were more extensive with fractures to the foot and ankle, as well as muscle damage.

An alignment of pre-planning, availability of resources, and teamwork resulted in lessons learned and a successful outcome.

Overview of Events

Communication

This medical emergency was announced early, but communications between Comms and the Incident Within an Incident's Incident Commander (IWI IC) were barely audible. Repeaters were still being positioned on the fire and the canyon in which the injured sawyer was located was in a communication dead spot.

Communication was therefore relayed from the accident scene to the Division Trainee on the Tactical Frequency, then relayed to the Communication Unit over Command. Cell phone texting was used to fill the void.



Key Decision/Action

The Division Trainee reached out directly to the Helibase Manager requesting a short-haul. This action greatly reduced the response time.

Sitting in the exact same spot using the mobile truck radio, at times the Division Trainee was able to get out and other times they couldn't use Command at all.

The IWI IC relayed the basic information to inform initial responders. This information included: *"Red Medical; fall injury; unconscious; need short-haul"*. Fifteen minutes later, subsequent information in the Medical Incident Report (8-Line) was relayed via Command to update all need-to-know incident personnel.

Originally, it was suggested that VMED 28 (a NIFC-designated channel for medevac aircraft) should be used for the air evacuation. Because the responding ships were agency and assigned to the incident, the short-haul operation switched to Air-to-Ground.



Key Lesson/Observation

Communication through cell phones was successful and pulled-in the important players. However, this means of communication left other need-to-know resources uniformed on the status of the patient.

Coordination

The Type 3 short-haul helicopter was performing a recon mission with Operations when this medical emergency incident occurred. Early notification allowed for a quick return for the helicopter's reconfiguration and for the crew to prepare themselves for the short-haul mission.

The Helibase Manager spoke to the short-haul ship and the rappel ship to coordinate the operation. The two helicopter crews' EMTs gathered and discussed specific equipment and capabilities for the mission. Hearing that there were no medical resources on scene, it was decided to insert EMT rappellers for early care and to start patient packaging prior to inserting short-haul resources.

EMTs from the rappellers and short-haul confirmed the type of medical extraction equipment that would be acceptable to package the patient (a Bauman Bag) for quick extraction.

As the incident progressed, three EMTs from crews in the Division responded to the patient's location prior to the rappellers' arrival. They assisted the swamper (who is an EMT but didn't have medical supplies) in assessing and stabilizing the patient.

Key Lesson/Observation

Two rappellers (one of whom is an EMT) rappelled into the patient with the gear needed to package the patient while the short-haul ship reconned the site and configured for the operation. This greatly reduced packaging times.

The rappellers were on the ground with the patient for 45 minutes and the short-haul EMTs were on the ground with the patient for 17 minutes. The overall short-haul time was considered very fast by both the Medical Unit Leader and the Helibase Manager.

Confusion about where to transport the patient for transfer of care was clarified by Air Branch and Safety through Air Attack, correcting a mapping error. The corrected site was large enough for both the incoming air ambulance and short-haul ship to land.

Key Lessons/Observations

- ❖ Special use platforms should communicate early during an incident, pre-planning for IWIs by coordinating with the Medical Unit Leader (MEDL). On this incident, the MEDL, the short-haul ship, Helibase Manager and Air Tactical Group Supervisor (ATGS) had discussed capabilities, but adding rappel operations was realized in the heat of the moment.
- ❖ Utilizing special use platforms (rappel and short-haul) together made for a fast and efficient response. Good communication prior to and in the air contributed to a safe operation as the two special use operations happened in unison in the same air space. ATGS also was vital as there were still bucket operations happening in the Division utilizing a nearby dip site.
- ❖ Incident Management Team members noted that Air Attack could be used as a relay on fires where repeaters are still being set up, filling communication holes on Command frequencies.

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