

Event Type: Dozer Operator Medical Extraction

Date: July 30, 2018

Location: Sugar Pine Fire 12 Miles Northwest of Prospect, Oregon

"I thought they would be doing a recovery—not a medical transport."

The Deputy IC, after hearing a description of the accident site.

Narrative

On 30 July at 0104 in the morning, approximately one mile northwest of DP 25, a dozer slipped off the edge of a logging road and tumbled down end-over-end, 175 feet to the bottom of a ravine.

A Paramedic, fireline overhead, and a hand crew quickly responded to the accident site.

Within approximately five minutes, the Paramedic and a crew member were on scene conducting patient evaluation and providing medical treatment. The patient had a broken hip, ribs, and head lacerations.

The fire overhead directed crew members to cut a switchback trail to the bottom of the hill where the Paramedic was treating the patient. The patient was assessed/stabilized/packaged and transported in a Stokes basket to the top of the hill. Crews then loaded him into a vehicle for transport to a waiting ambulance.

The Deputy IC, Unit Medical Leader located in the communications tent had directed the ambulance to meet the truck with the patient on a nearby paved road. When the truck arrived, the patient was quickly transferred to the back of the ambulance then transported to the Medford Medical Center.



Top photo shows where the dozer slipped off the edge of the logging road at O104 in the morning. Bottom photo shows where the dozer landed after tumbling down this 175-foot cliff face to the bottom of the ravine. (See page 2 for a close-up photo of the dozer in the bottom of the ravine.)

"He didn't flinch. He was cool as a cucumber."

The Deputy IC, on the crew member who provided the initial medical care to the injured dozer operator.

After the patient was evaluated, he was transported via Life Flight and admitted to Legacy Emanuel Hospital in Portland, Oregon.

<u>Successes</u>

 The patient was assessed/stabilized/packaged and transported in a Stokes basket in less than 60 minutes.



The dozer operator received a broken hip, ribs, and head lacerations.

- A Paramedic had been assigned to that part of the Division to provide medical support.
- The Incident Management Team (IMT) had an "Incident Within an Incident" (IWI) plan in place.
 - This IMT periodically practices IWI.
- Solid communication between personnel at the Incident Command Post aided greatly to the timely transport of the patient to the hospital.
- The on-scene Paramedic was able to radio directly to the Medical Unit Leader and provide a comprehensive patient status based on a baseline vital assessment/head-to-toe patient evaluation.
 - This provided a full picture of the patient's status to determine the best course of action for transporting the patient.
- The Paramedic was able to communicate to the crew member who did not speak English.
 - Complex medical treatment was provided with help from this crew member, who remained very calm throughout this entire medical incident.

Lessons

- Incident Management Teams need to plan an Incident Within an Incident.
 - IMTs need to practice dry run events to evaluate their IWI effectiveness.
 - Key personnel need to familiarize themselves with the plan.
- Communication between the on-scene Paramedic and the ICP Paramedic allows for a more comprehensive understanding of the patient's status.
 - The use of an on-scene vehicle to transport and meet the ambulance on the paved road saved valuable time on scene.
- Having the right people and equipment (Stokes basket) on scene was invaluable.

Timeline

0104: Dozer rollover.

0114: Deputy IC, Medical Unit Leader and Paramedic were in the Communication Unit.

0121: Contract crew started cutting a switchback trail from the road to the dozer.

0126: A Type 2 contract crew finished cutting this line. During the same time, the Paramedic who spoke very little Spanish, spoke with the Spanish-speaking contract crew member during the assessment, stabilization, and packaging of the patient.

0204: The Type 2 contract crew and Paramedic carried the patient from the dozer to the top of the hill.

0210: Patient was loaded and enroute to hospital.

0244: Patient was admitted to the Medford Medical Center for evaluation.

Questions

#1: There was a conversation about ground transport vs helicopter transport from the accident site.

Which might have been more efficient or faster?

#2: How often do incident management personnel practice/discuss IWI plans?

 It can be time consuming and logistically difficult to practice while managing an on-going incident.

#3: Do all IMTs have IWI plans?

How often do they practice or discuss them?

This RLS was submitted by:

The Northwest Risk Management Assessment Team – Tom Johnston, SOF1; and Arley Paulus, USFS R-10 Regional Health and Safety Specialist. Do you have a Rapid Lesson to share? Click this button:

> Share Your Lessons