



EMERGENCY INCIDENT REHABILITATION SOG

SCOPE

This guideline shall apply to all members of the Stoney Point Fire Department (SPFD) and shall be adhered to by all members.

PURPOSE

The purpose of this standard is to identify responsibilities of personnel To ensure that the physical and mental condition of members operating at the scene of an emergency or a training exercise does not deteriorate to a point that affects the safety of each member or that jeopardizes the safety integrity of the operation.

This procedure shall apply to all emergency operations and training exercises where strenuous physical activity or exposures to heat or cold exist.

DEFINITIONS

SHALL - Indicates a mandatory requirement.

STANDARD OPERATING GUIDELINES (SOG) - Documents that help establish how an organization will operate and how its members are expected to carry out specific duties outlined in general terms.

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GUIDELINES

Incident Commander

The Incident Commander shall consider the circumstances of each incident and make adequate provisions early in the incident for the rest and rehabilitation of all members operating at the scene. These provisions shall include: mental rest, relief from extreme climatic conditions, and the other environmental parameters of the incident. The rehabilitation shall include the provision of Emergency Medical Services (EMS) at the Basic Life Support (BLS) level or higher.

Supervisors

All supervisors shall maintain an awareness of the condition of each member operating within their span of control and ensure that adequate steps are taken to provide for each member's safety and health. The command structure shall be utilized to request relief and the reassignment of fatigued crews.

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Personnel

During periods of hot weather, members shall be encouraged to drink water and/or activity beverages throughout the work day. During any emergency incident or training evolution, all members shall advise their supervisor when they believe their level of fatigue or exposure to heat or cold is approaching a level that could affect themselves, their crew, or the operation in which they are involved. Members shall also remain aware of the health and safety of other members of their crew.

ESTABLISHMENT OF REHABILITATION DIVISION

Responsibility

The Incident Commander will establish a Rehabilitation Division when conditions indicate that rest and rehabilitation is needed for personnel operating at an incident scene or training evolution. A member will be placed in charge of the group and shall be



known as the Rehab Officer. The Rehab Officer will typically report to the Operations Officer in the framework of the incident management system.

Location

The location of the Rehabilitation Area will normally be designated by the Incident Commander. If a specific location has not been designated, the Rehab Officer shall select **an appropriate location based on the site characteristics and designations below.**

Site Characteristics

- It shall be in a location that will provide physical rest by allowing the body to recuperate from the demands and hazards of the emergency operation or training evolution.
- It should be far enough away from the scene that members may safely remove their turnout gear and SCBA and be afforded mental rest from the stress and pressure of the emergency operation or training evolution.
- It shall provide suitable protection from the prevailing environmental conditions. During hot weather, it should be in a cool, shaded area. During cold weather, it should be in a warm, dry area.
- It should enable members to be free of exhaust fumes from apparatus, vehicles, or equipment (including those involved in the Rehabilitation Group operations).
- It should be large enough to accommodate multiple crews, based on the size of the incident.
- It should be easily accessible by EMS units.
- It should allow prompt reentry back into the emergency operation upon complete recuperation.

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Site Designations

- A nearby garage, building lobby, or other structure.
- Several floors below a fire in a high rise building.



- A school bus, municipal bus, or bookmobile.
- Fire apparatus, ambulance, or other emergency vehicles at the scene or called to the scene.
- An open area in which a rehab area can be created using tarps, fans, etc.

Resources

The Rehab officer shall secure all necessary resources required to adequately staff and supply the Rehabilitation Area. The supplies should include the items listed below:

- Fluids - water, activity beverage, oral electrolyte solutions and ice.
- Food - soup, broth, or stew in hot/cold cups, these items are subject to special call.
- Medical - blood pressure cuffs, stethoscopes, oxygen administration devices, cardiac monitors, intravenous solutions and thermometers.
- Other - awnings, fans, tarps, smoke ejectors, heaters, dry clothing, extra equipment, floodlights, blankets and towels, traffic cones and fire-line tape (to identify the entrance and exit of the Rehab Area).

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Rehabilitation Division Establishment

- Rehabilitation shall be considered by Chief 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 Rehab 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 of rehabilitation.



Hydration

A critical factor in the prevention of heat injury is the maintenance of water and electrolytes. Water must be replaced during exercise periods and at emergency incidents. During heat stress, the member should consume at least one quart of water per hour. The rehydration solution should be a 50/50 mixture of water and a commercially prepared activity beverage and administered at about 40°F. Rehydration is important even during cold weather operations where, despite the outside temperature, heat stress may occur during firefighting or other strenuous activity when protective equipment is worn. Alcohol and caffeine beverages should be avoided before and during heat stress because both interfere with the body's water conservation mechanisms. Carbonated beverages should also be avoided.

Nourishment

The department shall provide food at the scene of an extended incident when units are engaged for four or more hours. A cup of soup, broth, or stew is highly recommended because it is digested much faster than sandwiches and fast food products. In addition, foods such as apples, oranges, and bananas provide supplemental forms of energy replacement. Fatty and/or salty foods should be avoided.

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Rest

The "two bottle rule" or 45 minutes of work time, is recommended as an acceptable level prior to mandatory rehabilitation. Members shall rehydrate (at least eight ounces) while SCBA cylinders are being changed. Firefighters having worked for two full 30-minute rated bottles, or 45 minutes, shall be immediately placed in the Rehabilitation Area for rest. Evaluation of a member's fatigue level shall be the criteria for rehab time. Rest shall not be less than ten minutes and may exceed an hour as determined by the Rehab Officer. Fresh crews, or crews released from the Rehabilitation Group, shall be available in the Staging area to ensure that fatigued members are not required to return to duty before they are rested, evaluated, and released by the Rehab Officer.



Recovery

Members in the Rehabilitation Area should maintain a high level of hydration. Members should not be moved from a hot environment directly into an air conditioned area because the body's cooling system can shut down in response to the external cooling. An air conditioned environment is acceptable after a cool down period at ambient temperature with sufficient air movement. Certain drugs impair the body's ability to sweat and extreme caution must be exercised if the member has taken antihistamines, such as Actifed or Benadryl, or has taken diuretics or stimulants.

Medical Evaluation

Emergency Medical Service (EMS) - EMS should be provided and staffed by the most highly trained and qualified EMS personnel on the scene (at a minimum of BLS level.) They shall evaluate vital signs, examine members, and make proper disposition (return to duty, continued rehabilitation, or medical treatment and transport to medical facility). Continued rehabilitation should consist of additional monitoring of vital signs, providing rest, and providing fluids for rehydration. Medical treatment for members, whose signs and/or symptoms indicated potential problems, should be provided in accordance with local medical control procedures. EMS personnel shall be assertive in an effort to find potential medical problems early.

Heart Rate and Temperature - The heart rate shall be measured for 30 seconds as early as possible in the rest period. If a member's heart rate exceeds 110 beats per minute, an oral temperature shall be taken. If a member's temperature exceeds 100.6, he/she shall not be permitted to wear protective equipment. If it is below 100.6 and the heart rate remains 110 beats per minute, rehabilitation time shall be increased. If the heart rate is less than 110 beats per minute, the chance of heat stress is negligible.

Documentation - All medical evaluations shall be recorded on a hand written log along with the member's name and complaints and must be signed, dated and timed by the Rehab Officer or his/her designee.

Accountability

Members assigned to the Rehabilitation Area shall enter and exit the Rehabilitation Area as a crew. The crew designation, numbers of crew members, and the times of entry to and exit from the Rehabilitation Area shall be documented by the Rehab Officer or his/her designee on the

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Programs

Standard Operating Guidelines (SOG)

Company Check-In/Out Sheet. Crews shall not leave the Rehabilitation Area until authorized to do so by the Rehab Officer.

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