

**Miami Valley Fire/EMS Alliance
Emergency Incident Rehabilitation
SOP**

Purpose

To insure no member of the _____ Fire Department or supporting agency will be required to operate beyond established safe levels of physical or mental endurance. This policy is in no way intended to cause or diminish from aggressive initial fire attack or rescue operations. The intent is to establish a reasonable guideline to be followed to prevent risk of injury that may result from long, sustained field operations.

Scope

This guideline shall apply to all emergency operations and training exercises where strenuous physical activity or exposure to heat or cold may exist. The Rehab Sector shall provide a specific area where personnel will assemble to receive:

- A. A physical assessment
- B. Revitalization – rest, refreshment, equipment
- C. Medical evaluation and treatment of injuries
- D. Monitoring of physical condition
- E. Transportation
- F. Initial CISD
- G. Reassignment

Responsibilities

- A. Incident Commander/O.I.C.: make the determination of the need for a Rehab Sector. Shall appoint a Rehab Officer and designate the area to be utilized as the Rehab Sector. The Rehab Sector should be established in an area away from the operational activities, if possible, and shall be utilized if:
 - a. A moderate to long working time is expected (remember the non-fire long term incidents, i.e. crime scene, search activities, public events, training activities, etc.
 - b. A moderate to large manpower force is utilized
 - c. Weather conditions indicate the need (extreme heat and/or humidity or extreme cold)
 - d. At any other incident where the I.C./O.I.C. deems it necessary
- B. Personnel: shall proceed to Rehab if their level of fatigue or exposure to heat or cold is approaching a level that could affect their ability to perform normal duties at an emergency incident. Anyone reporting to the Rehab Sector will notify the I.C. of the change from his/her original assignment. When in doubt, exercise the two-bottle (SCBA) rule for reporting to Rehab.

Rehab Sector Location: As designated by the I.C./O.I.C. in an area that will provide physical and psychological rest and allow for the body to recuperate from the demands and hazardous encountered at an emergency incident.

Rehab Characteristics: Shall be suitable to protect the employees from the prevailing environmental conditions. During hot weather the area should be cool, and during cold weather the area should be heated. Shall be large enough to accommodate multiple crews. Shall be easily accessible to EMS units. Shall be free of exhaust fumes from apparatus, vehicles, or other motorized equipment. Shall be quiet and have restricted media access.

Site Designations: A nearby structure, building lobby, or other structure. In multiple floor buildings, several floors below the below. Transport type vehicles, (school bus, RTA bus, etc.) Medic units.

Resources: Nourishment should be provided at any scene on an extended incident when units will be engaged for two (2) or more hours. All necessary resources to adequately staff and supply the Rehab are includes:

- A. Fluids: water, activity beverages diluted 20/50 with water, oral electrolyte solution
- B. Food: soup, broth, stew, pizza, cold cups with fruit, trail mix, high carbohydrate energy bars
- C. Medical: BP cuffs, stethoscopes, oxygen, cardiac monitors, IV materials, pulse oximeter, thermometer
- D. Other: blankets, towels, clothing, fresh protective equipment, lights, etc.
- E. Avoid all carbonated beverages, alcohol based solutions, fatty and salty foods

Medical Evaluation: The Rehab team shall evaluate vital signs; monitor Pulse Oximetry, Cardiac Rhythms, temperature, as well as for signs of dehydration. Individuals exhibiting signs of stress, extreme fatigue or obvious injuries should be evaluated in the Rehab Sector. Remember, the care in rehab is separate from caring for injured civilians.

All members reporting to the Rehab Sector shall check in with the Rehab Officer both at the entrance and exit point. If available, Accountability Passports will be used.

A log will be used to indicate the members name, arrival time, number of air bottles used, blood pressure, pulse, respiration, temperature, skin condition, any complaints or pertinent condition, and if transported. The Rehab log shall be attached to the Fire Run report as part of the permanent record.

The following list of vital signs monitoring figures shall be used as guidelines to determine the course of action to be taken with firefighters working at an emergency incident:

- A. Blood Pressure:
 - a. Diastolic BP greater than 130 consider transport to hospital
 - b. Diastolic BP greater than 100 with symptoms of Heat Stress consider transportation to the hospital
 - c. Systolic BP greater than 200 monitor vital signs closely - If BP is still greater than 200 after rest and evaluation, transport to hospital.

B. Pulse:

- a. A heart rate that is greater than 140, give oxygen, fluids and rest. If heart rate is below 120 after 15 minutes, the firefighter can return to work.
- b. If the heart rate remains above 140 after 15 minutes, then rest the firefighter for 30 minutes and monitor the cardiac rhythm, give oxygen and fluids.
- c. If the heart rate remains above 140 after 30 minutes, then transport to hospital.

C. Pulse Oximetry:

- a. If any Pulse Oximetry reading is below 96% give oxygen and continue monitoring. Any Pulse Ox reading below 85% the member shall be transported to the hospital.

D. Temperature:

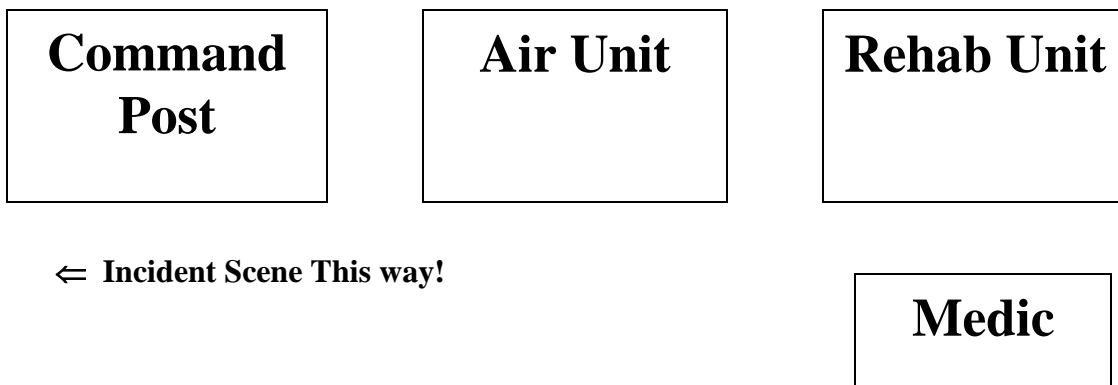
- a. If temperature is above 105 degrees F after 15 minutes transport to hospital.
- b. If temperature is above 101 degrees F after 15 minutes but below 105 degrees F continue fluid replacement and rest. Member is not allowed to return to work until temperature is below 101 degrees F.

Resting Periods: The “Two Bottle Rule” or 45 minutes of work time is recommended as an acceptable level prior to mandatory rehabilitation. Members are recommended to re-hydrate with a minimum of eight (8) ounces of fluid while air bottles are being refilled. Resting periods should be no less than fifteen (15) minutes. Members being released from the Rehab Sector shall return to the Staging area for re-assignment unless otherwise advised.

Necessary Equipment: The following equipment is necessary to operated an effective Rehab Sector:

- A. Medic Unit
- B. Air Unit (separate member to operate)
- C. Rehab Unit (Montgomery Special Unit, Box 21, etc.)
- D. BP Cuffs, Stethoscopes, Pulse Oximeter, Cardiac Monitor, Portable Oxygen Unites, Thermometer
- E. Nourishments

Rehab Scene Diagram:



Rehabilitation Points of Interest:

- A. Every member should drink eight (8) glasses of water for pre-hydration.**
- B. Avoid candy bars and soda pop on the fireground**
 - a. Pop is 15-16% sugar and what you are drinking in rehab should be a maximum of 5-6% sugar.**
 - b. Candy will give you a “sugar high” for a short period of time, then you will “crash” and become sleepy.**
- C. Pasta meals are excellent carbohydrate (energy) sources to eat the day/evening before your duty day. Remember, you get the energy you need to perform work on your duty day from what you have eaten the day before.**
- D. Avoid alcohol the night before and large amounts of coffee the morning of your duty day. These dehydrate the body and forces you to play “catch-up hydration” when at the incident.**
- E. Monitor your urine output’s color to gauge your level of hydration. Colorless/clear is a sign of good hydration. The darker the color the more hydration you should practice.**

Rehab Log Sheet/Report:

Date: _____ **Run#:** _____ **Location:** _____

Name	Dept	Time	BP	P	R	P/Ox	Temp	Monitor	Air Bottle	Physical Condition

