Search & Rescue Team

Copyright by Bill Pope, 2014, 2015, 2018
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www.HilltopHERO.org

HERO'S Mission

Do the most good for the most people

(in each Response Time Window).

Response Time Windows

(Average Maximum Window length.)

4 Minutes - Death from:

- Burning. (Tissue damage & Asphyxiation by smoke, toxic fumes.)
- Buried. (Suffocation from debris, chest compression.)
- Bleeding. (Arterial Exsanguination.)
- Not Breathing. (Tongue blocks airway when unconscious.)

- Death from imminent subsequent collapse.
- Fire. (A home can go from spark to fully-involved in under 10 minutes.)

4 Hours - Death from Slow Bleeding, Shock (Internal damage).

24 Hours - Death from Exposure (trapped victims).

4 Days - Death from Dehydration (trapped victims).

4 Weeks - Death from Starvation (mobility-impaired w/o help).

Phases of Rescue Work

Phases of Rescue Work

Phase 1 - Individual Response.

Save those Burning, Buried, Bleeding, not Breathing
immediately around you, and
drag non-mobile from collapsing buildings
by yourself with no equipment,
wherever you are when disaster strikes.

Phases of Rescue Work

Phase 1 - Individual Response:

Save those Burning, Buried, Bleeding, not Breathing
immediately around you, and
drag non-mobile from collapsing buildings
by yourself with no equipment,
wherever you are when disaster strikes.

Phase 2 - Team Response:

Find & address one or more incidents in the area.
Search & Rescue victims from damage buildings.
Find & Treat injuries.
Provide basic Life Support.
Transport when hospitals open.

(Teams and Equipment required.)

Action Plans

Phase 1. Individual Response:

A. At your Home/Business

B. At a Mass Casualty Incident (MCI)

Phase 2. Team Response to:

A. All incidents in a Neighborhood/Workplace by a pre-organized team.

B. Single incident by an ad hoc Convergent Team.

Focus during Response Time Windows

Phase 1- Individual Response

First 4 Min.	Death from Burning, Buried, Bleeding, Not Breathing.	A. Your Family or Coworkers, or B. Public at a Mass Casualty Incident.
10 Min.	Fire Suppression, Evacuation.	

Phase 2 - Team Response

A. Neighborhood, or
B. Single Incident.

		Damage Survey Team (A. only)	**Search & Rescue Team** (A, & B.)	**Medical & Transport Teams** (A. & B.)
4 Hours	Death from Slow Bleeding, Shock.	Major Damage Survey (Incidents) →	Find and extract non-mobile victims from Moderately Damaged buildings. (Casualties) →	Triage. Evaluate. Treat. Transport.
24 Hours	Death of Trapped from injuries and exposure.	Light Damage Investigation (Incidents) →	Move casualties to safe location, Lightly Damaged buildings. (Casualties) →	Triage. Evaluate. Treat. Transport.
4 Days	Death of Trapped from Dehydration.			

1st 10-Minutes (includes 4-Minute Life Saving Window)

(At Your Home or Business)

CERT Field GuideBook Section 1. Initial Individual Response

1. Drop, Cover and Hold On.

BASIC Life Saving of Family / Coworkers Burning, Buried, Bleeding, or Not Breathing.

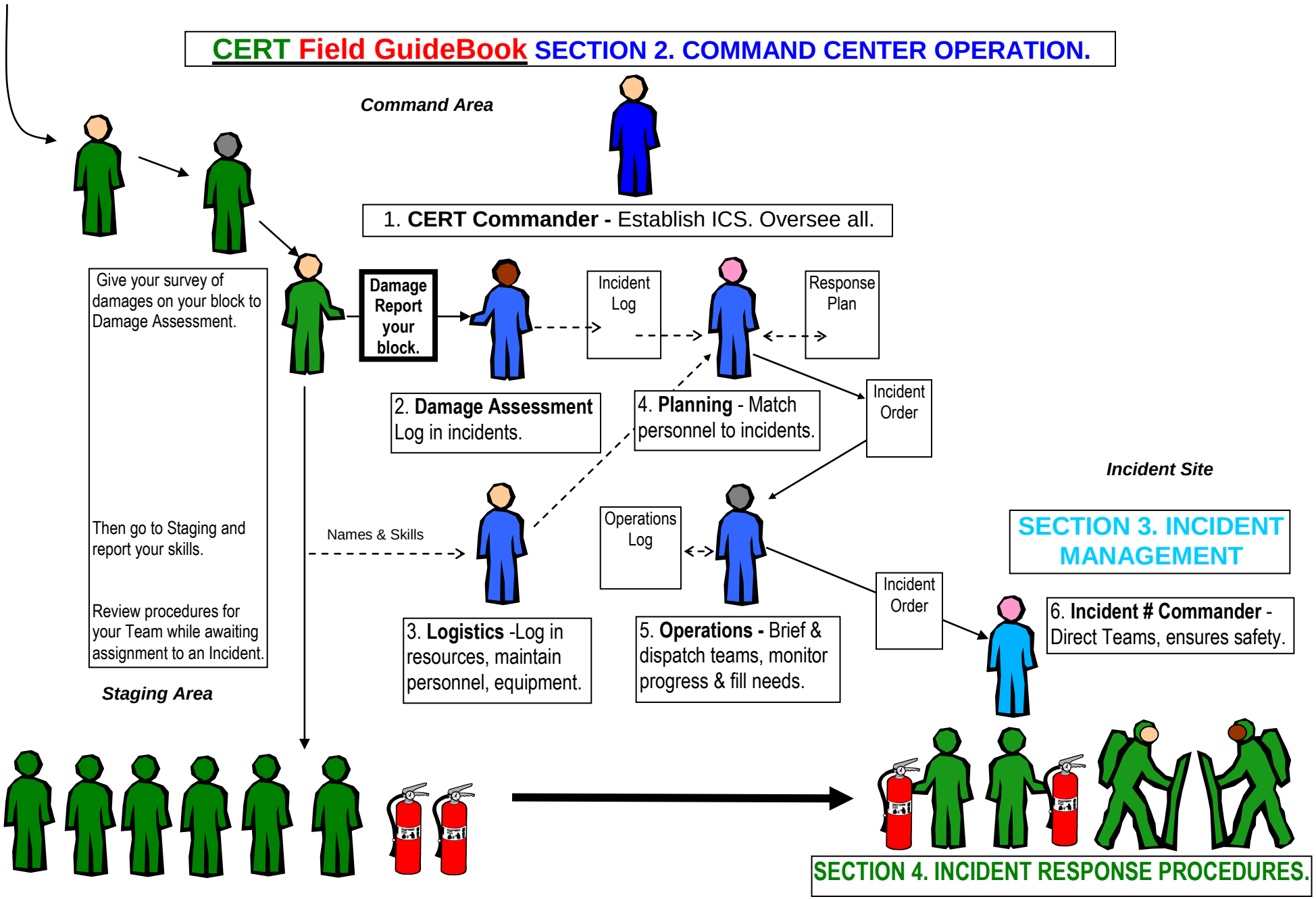
Size-Up your home or small business. Evacuate if Moderately or Heavily Damaged.

Shut-off Gas if leaking, Electricity if damaged, Water if leaking and to prevent contamination.

Triage, Injury Evaluation and Treatment.

2. Survey damages on your block on your way to Community/Workplace Command Post.

Central Command Post Operations



MV Hill's Command Center

Grand View @ Indianapolis

Priorities:

1. **Rescuer Safety.**

2. **Prevent further injury and loss of life.**

3. **Help those already injured.**

4. **Minimize additional property loss.**

Jobs

1. Cordon-off:
   - Downed Power Line &
   - Unsafe Roads.
   - Hazardous Material leaks & spills.

2. Suppress small fires. Contain large fires.

3. Shut-off Utility at damaged buildings.

4. Search for and Rescue casualties from Moderately damaged buildings.

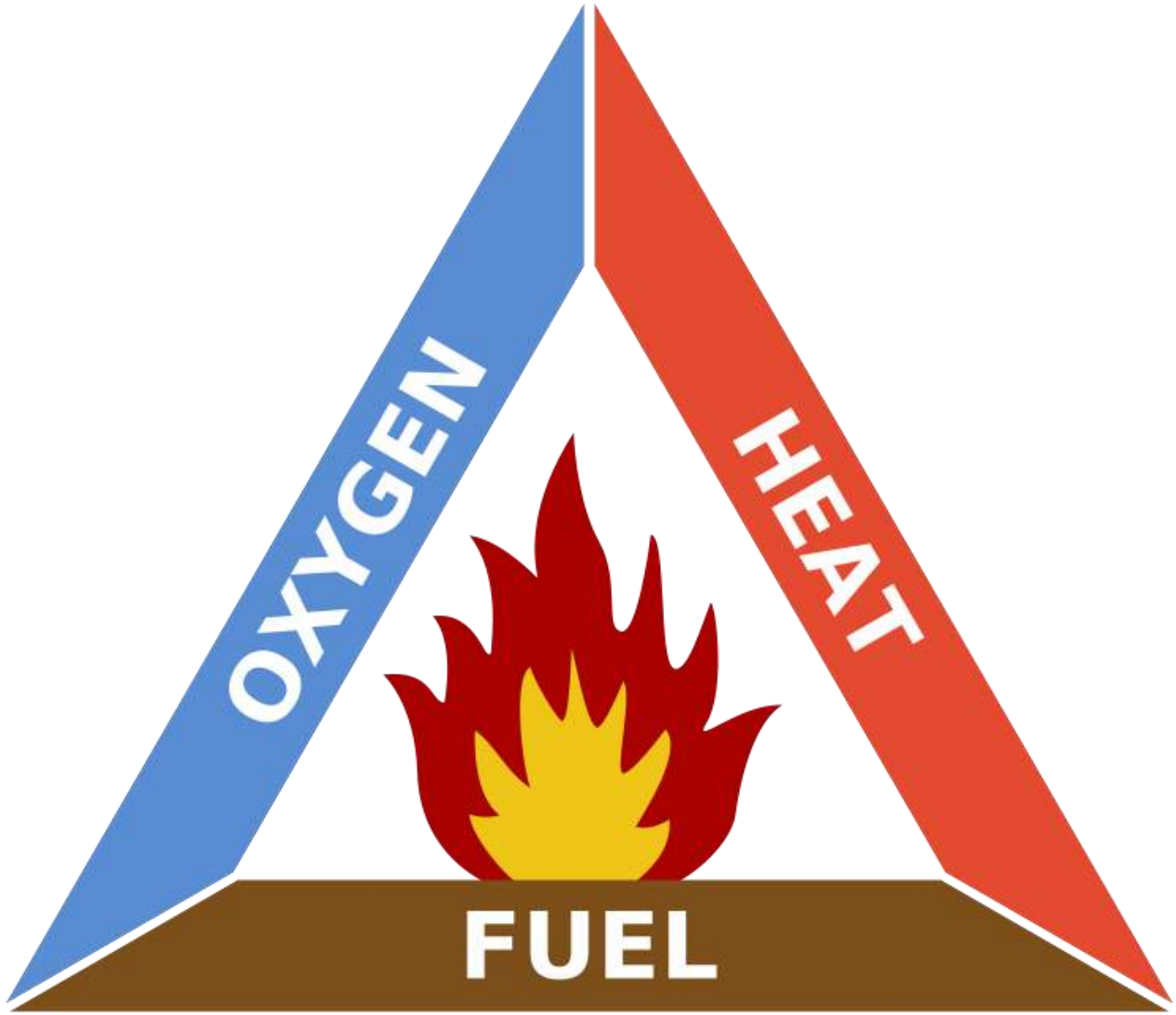
5. Help Medical Team move casualties in or transport casualties from Lightly damaged buildings.

Requires strong, physically fit, clear-thinking people.

Fire

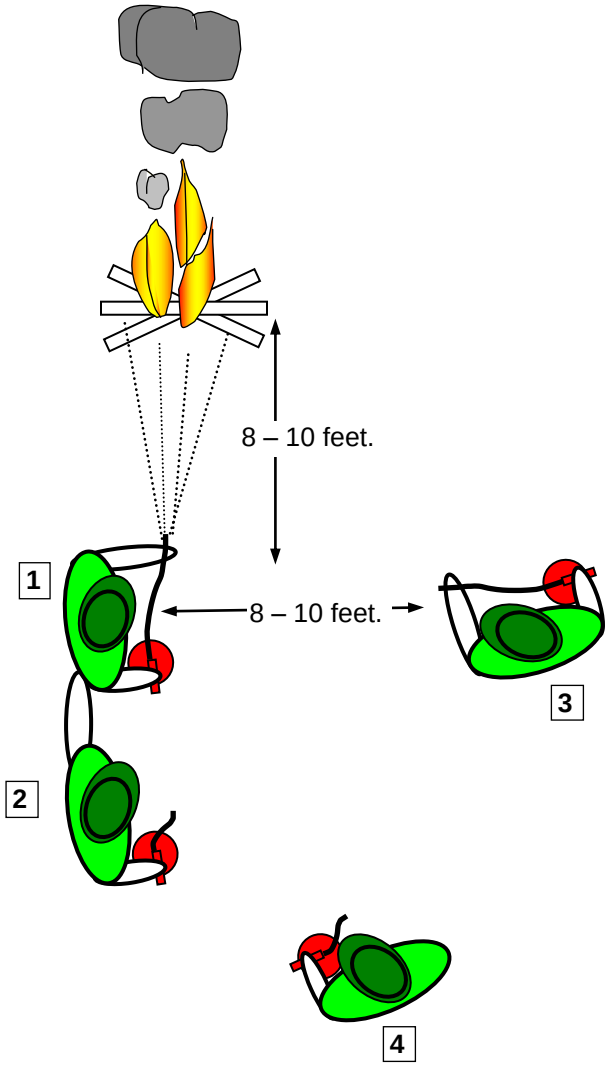
Suppression

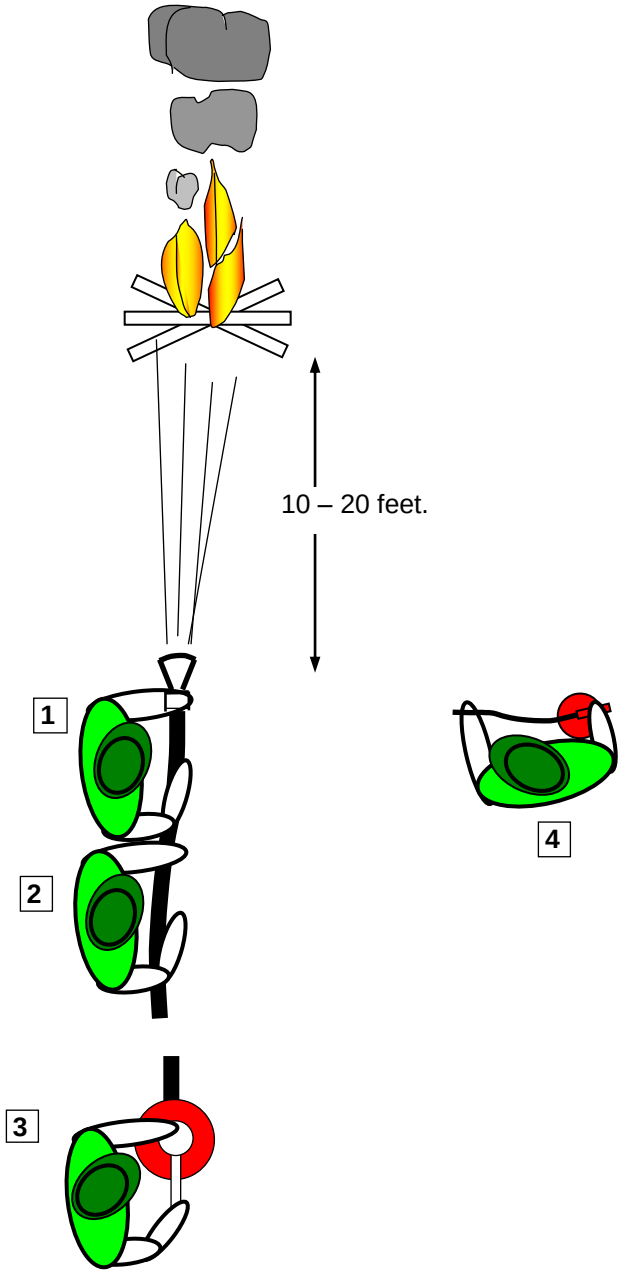
3 Things Required for Fire



Remove any one to stop the fire.

Team approach to Fire Suppression.





Fire Facts

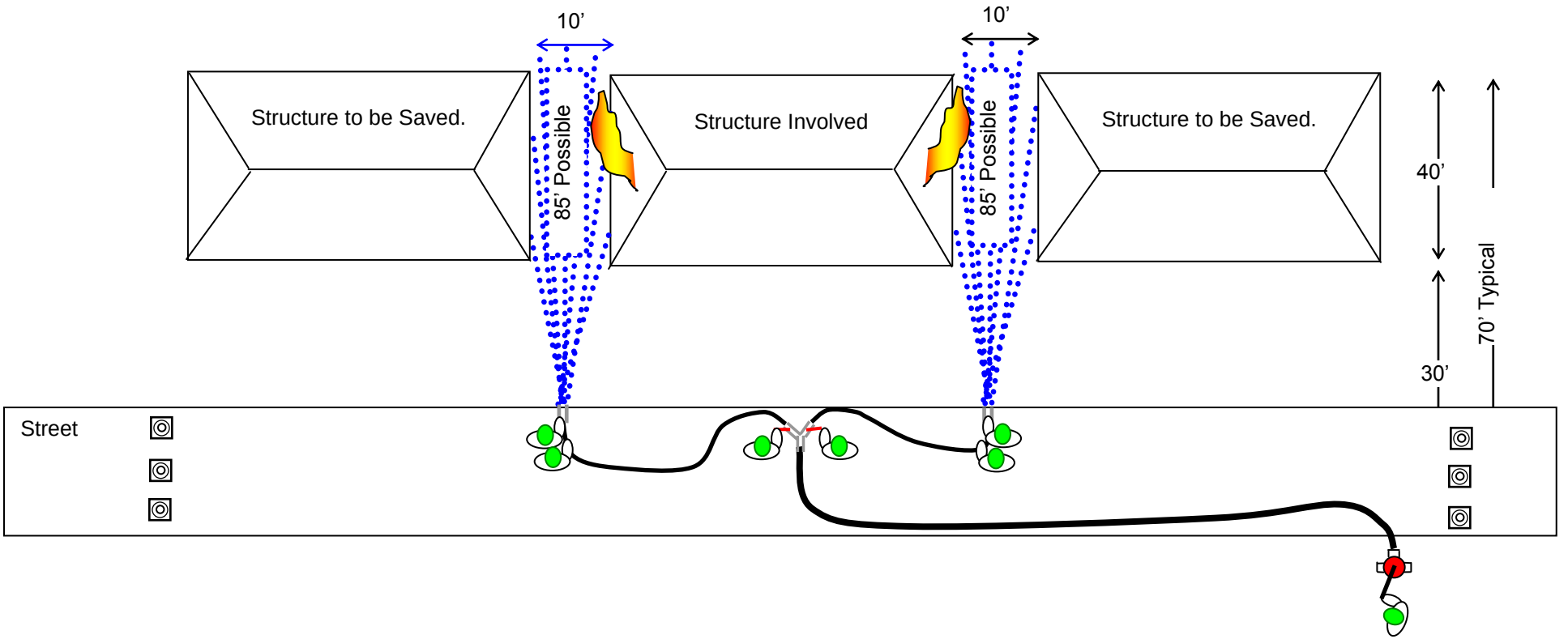
Fire grows very quickly.
(See Christmas Tree Fire movie.)

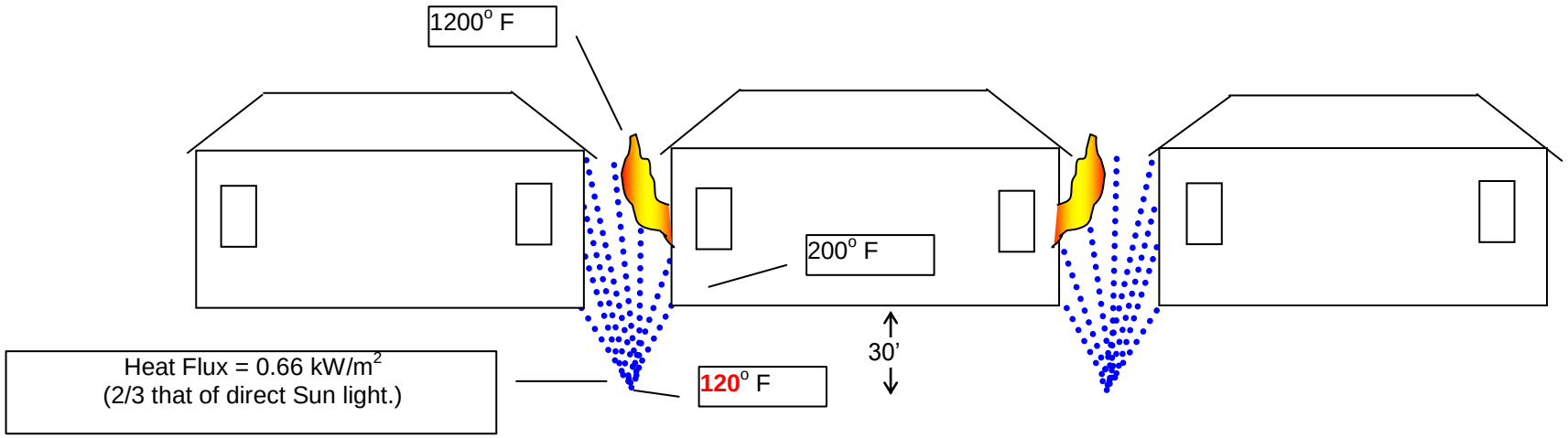
Fire Suppression Team may not get to scene in time to stop it.

Best defense is for every residence to have two 3A:40B:C or larger extinguishers.

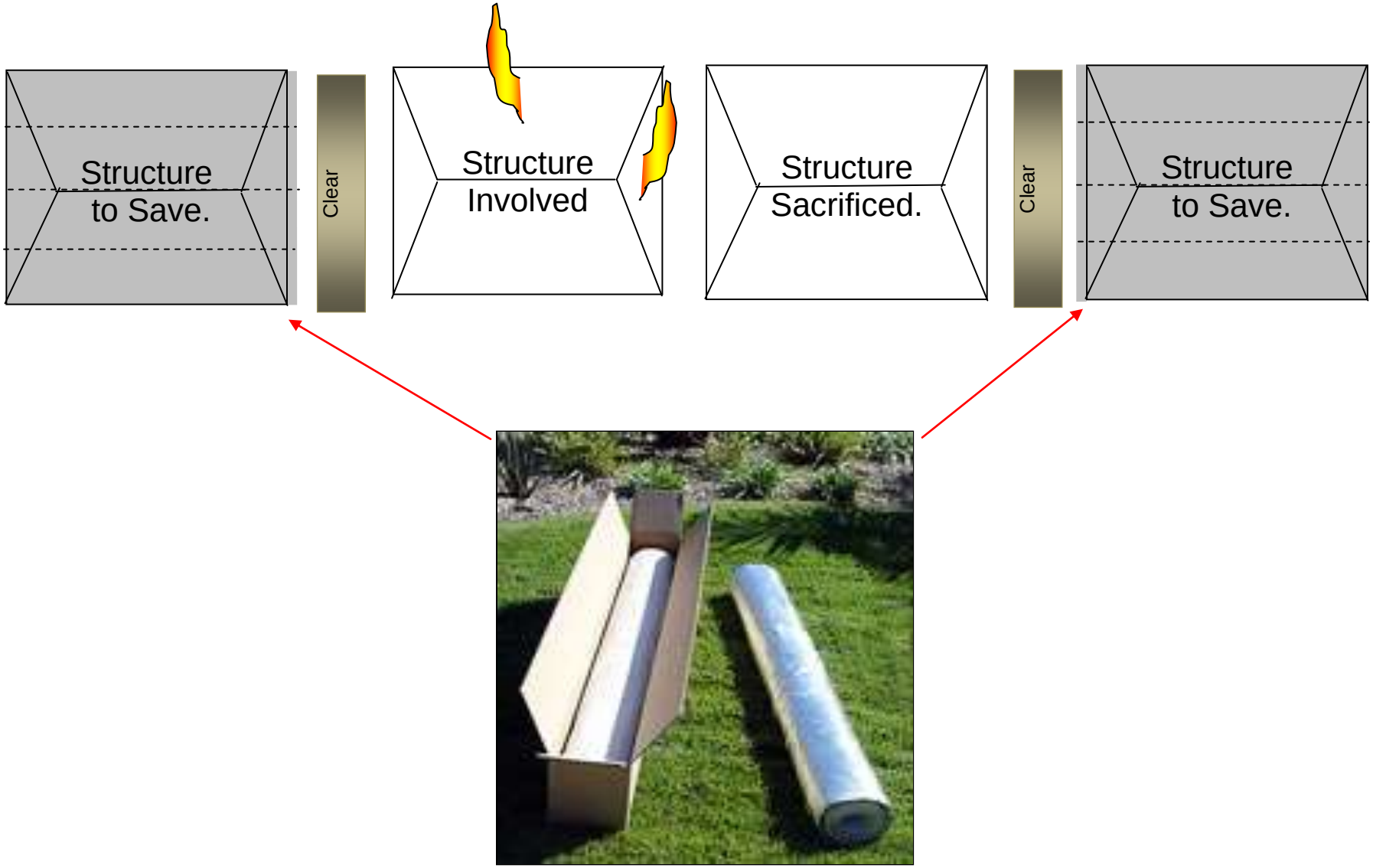
If suppression not possible, containment may be.

Fire Containment



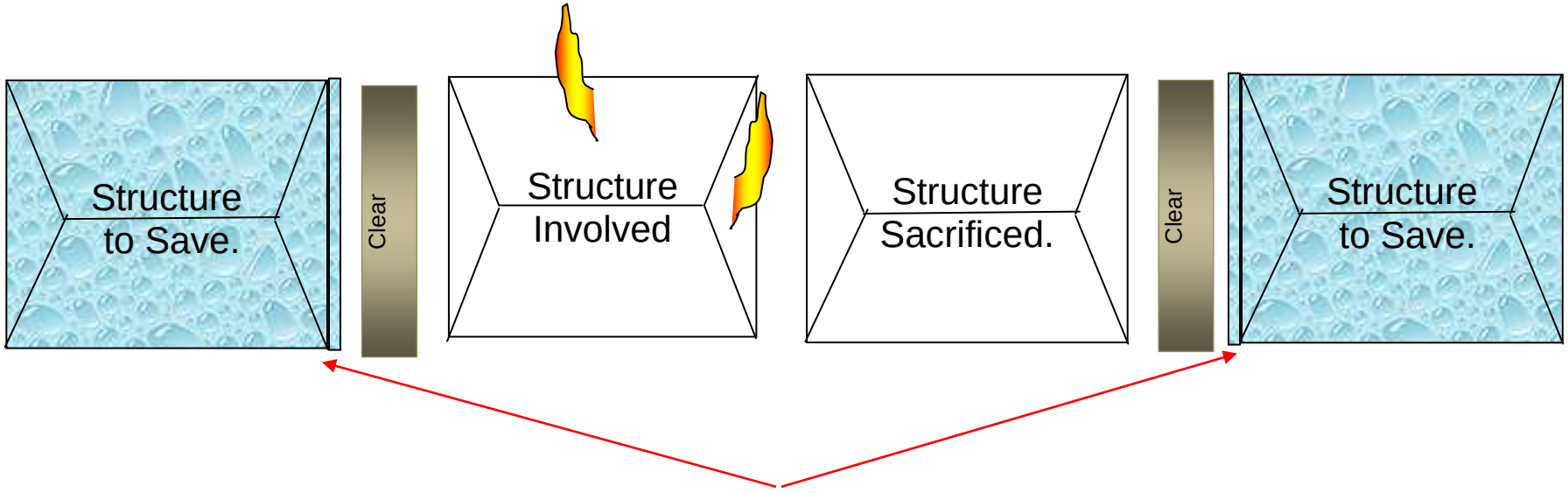


Fire Containment with Breaks & Shields



Firezat heat shield fabric, 12' x 60' roll.
4 rolls x $750/roll = $3000 (plus sand bags).

Fire Containment with Breaks & Foam



Or

BURNER CAFS 30-C
30 Gallon trailer-able Compressed Air Foam System.
Foam produced: 300 Gal.
Refills to cover two 3000 SF areas:
Discharge distance: 75 Feet.
$8500

FOAMSAFE Bakpak™
5 Gallon backback Compressed Air Foam System.
Foam produced: 50 Gal.
Refills to cover two 3000 SF areas:
Discharge distance: 40 Feet.
$

Hazardous Material Fires

Don't fight a Hazardous Materials Fire.

=

If your CERT performed Community/Workplace Preparation Task ii. *Identify and Map Hazards* **(GuideBook, page 19),**

1. **Evacuate the Isolation Area.** **(GuideBook, page 76).**
2. **Warm those in downwind Protect Area to Shelter-in-Place.**

Otherwise, leave the area.

Best Practices.

Prevent fires from starting.

Install automatic gas shutoff valve.

If your home is damaged, shut off Electricity then Gas. (Shut off water is leaking.)

Stop small fires before they become large fires.

A home fire can go from spark to fully-involved in under 10 minutes.

Everyone should have at least two 3-A:40-B:C extinguishers at home.

Place outside front door for CERT used if not needed.

If you can't stand the heat at 10 feet, the fire is too large to fight with extinguishers. Leave.

Utility Management

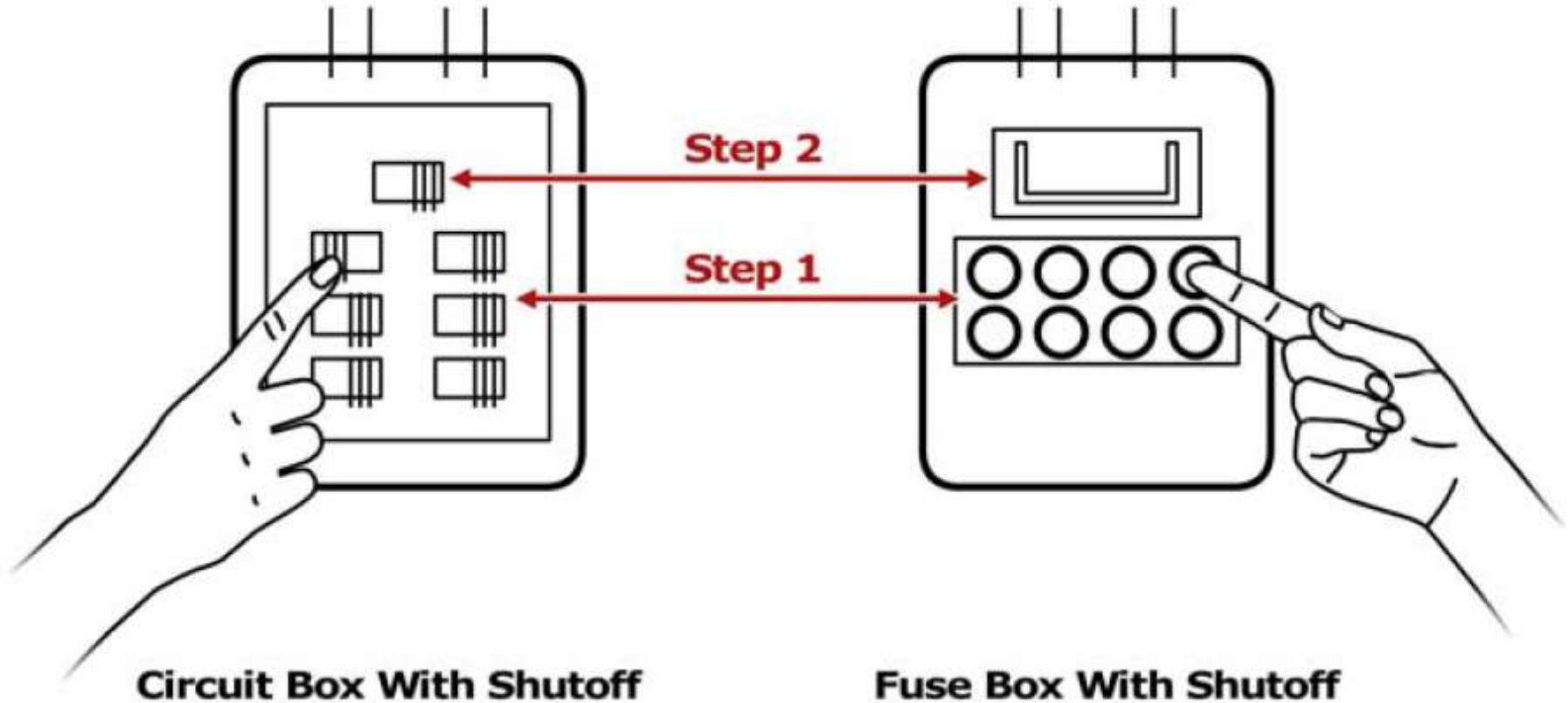
Utility Shut-off

Shut-off Utilities, in alphabetic order, under the following conditions:

Damage:	Light[1]			Moderate[2] or Heavy[3]
Condition:	Fire	Gas Leak (smelled or meter spinning)	Water Leak (seen, heard or felt.)	-
Shut-off:	1. Electric. 2. Gas,	1.Electric. 2.Gas. 3. Vent Building.	1.Electric. 2.Water.	1. Electric. 2. Gas. 3. Water.

[1] **Light –** Broken Windows. Damage mostly cosmetic and to contents. Treat inward-falling chimney as Moderate. Building habitable.
[2] **Moderate** – Broken exterior walls &/ tilting but not raked. Major damage to interior contents which may shift. Building Not habitable.
[3] **Heavy** – Raked, partial/total collapse of wall(s), floor(s) or roof, masonry bldg off foundation, or pre-1933 brick. Building Not habitable.

Electricity Shut-off



Circuit Box With Shutoff

Circuit box showing shutoff steps.
Step 1: Shut off individual breakers.
Step 2: Shut off main breaker.

Fuse Box With Shutoff

Fuse box showing shutoff steps.
Step 1: Pull out individual fuses.
Step 2: Pull out main fuse.

Gas Leaks

Gas leaks: - Probable at Heavily Damaged building.
- Likely at Moderately Damaged building.
- Possible at Lightly Damaged Building.

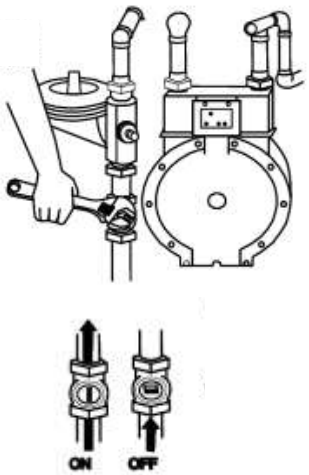
Explosions unlikely at Heavy & Moderates because gas is venting.

Leaks at intact buildings are more dangerous to both residents and rescuers.

Shut off if safe to reach (outside Collapse-Danger Zone).

House Shut-off.

Shut-off Valve.



Street Shut-off.

Emergency Shut-off.

Gas Leak Shut-off Steps

1. If at night, do not raise residents until electric & gas shut off.
2. Shut off electric, then gas.
3. Attempt to raise residents or get key from neighbors.
4. If building believed occupied and no response, vent building.

Water Shut-off

Do Not enter a flooded building.
Can't see sharps on or holes in floor.
Everything wet could be energized.

Shut-off 1) Electric, then 2) Water.

House Ball Valve.

House Gate Valve

Street Valve

Street Valve Key

Search

&

Rescue

S & R varies based on Building Damage

Levels of Building Damage:

- **Lightly Damaged**
- **Moderately Damaged**
- **Heavily Damaged**

Determined by "Structure Triage"

Classify level of building damage.

Structure Triage, done by:

- **Damage Survey Team during Area Damage Survey**
- **S&R Team at each incident to which you are assigned.**

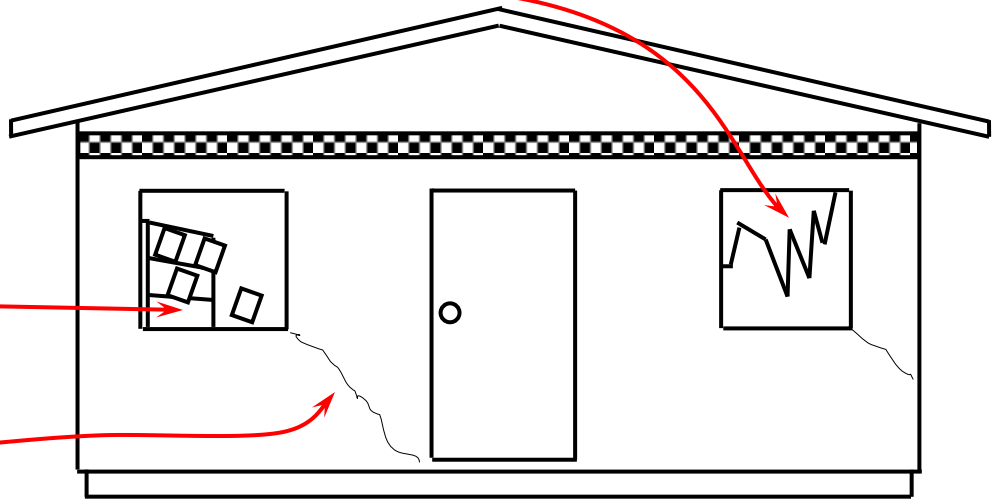
Lightly Damaged Building

Broken Window(s).

(No apparent damage to exterior walls visible from street distance.)

Damage mostly to interior contents.)

(Any exterior wall cracks are less than ¼" and usually unidirectional.



Structure Triage Symbol:

Lightly Damaged Building

Broken Windows.

Lightly Damaged Building

Damage mostly to interior contents.

Lightly with Special Conditions

Special Condition - Many Broken Windows.

Light Damage with Special Conditions

(Can you see the Special Condition?)

Lightly with Special Conditions

Special Condition = Chimney Fell into house.

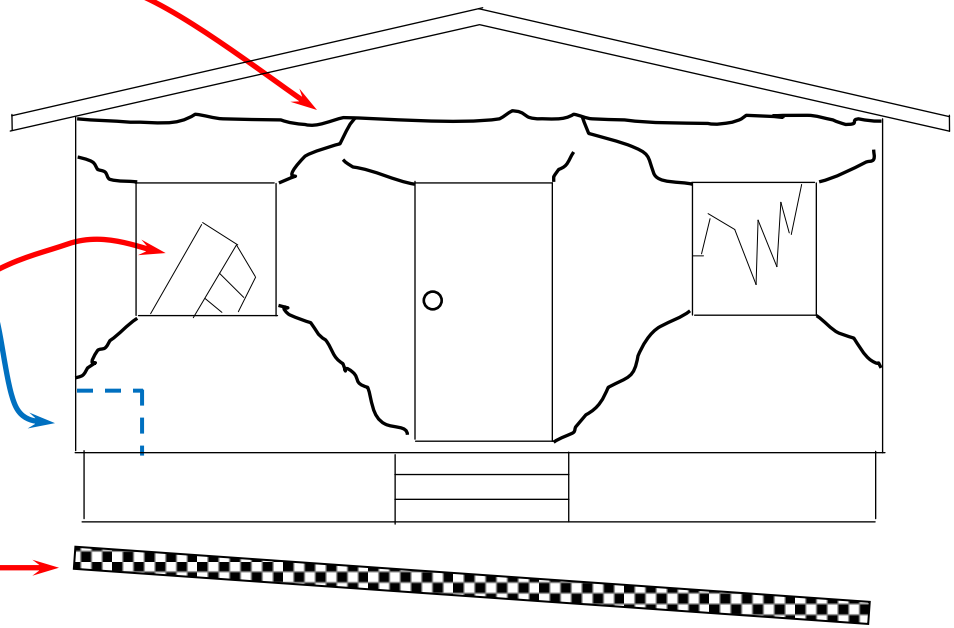
Moderately Damaged Building 1

Broken Wall(s)

Cracks visible from a distance (the street).
Cracks generally ≥ ¼" and bidirectional.
But:

Not Racked. (All walls are square.)

No separation of walls, floors & roof.

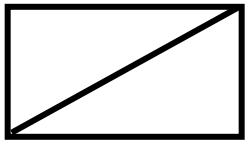


Fallen Decorative Work.

Major Interior Debris,

(e.g., Toppled Furniture trapping victims, blocking exits.)

Structure Triage Symbol:



Moderately Damaged Building 2

Detached from:

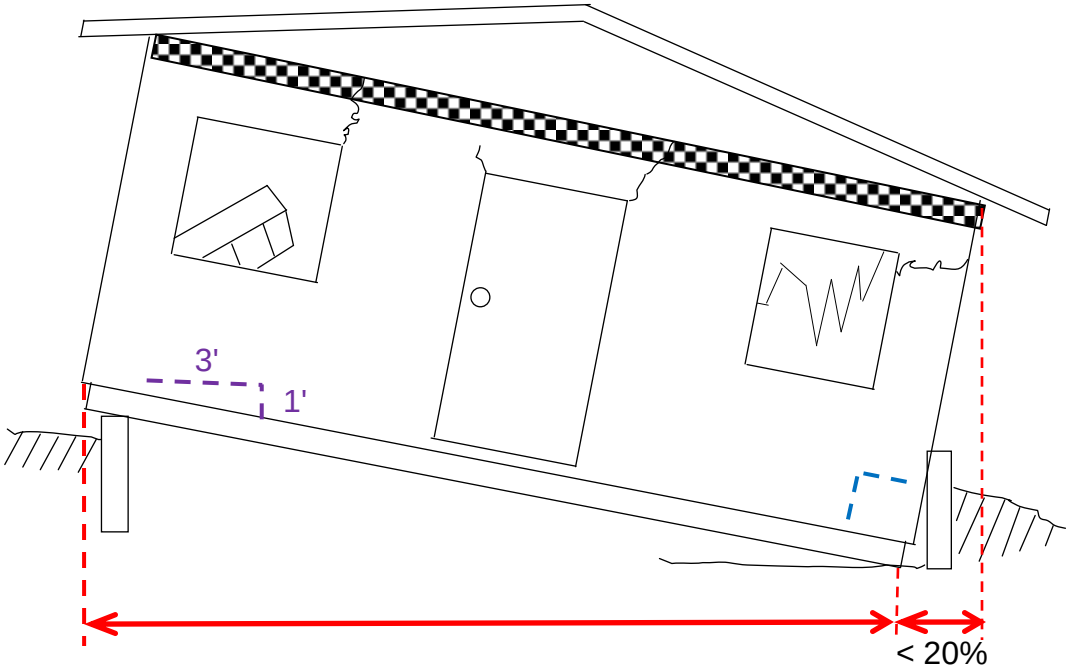
- **Raised Foundation, but:**

  - Tilt is < 20° [< 1' drop in 3'}

  - Out of Column < 20%.

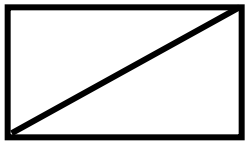
- **Slab Foundation.**

  (Probably not tilting.)



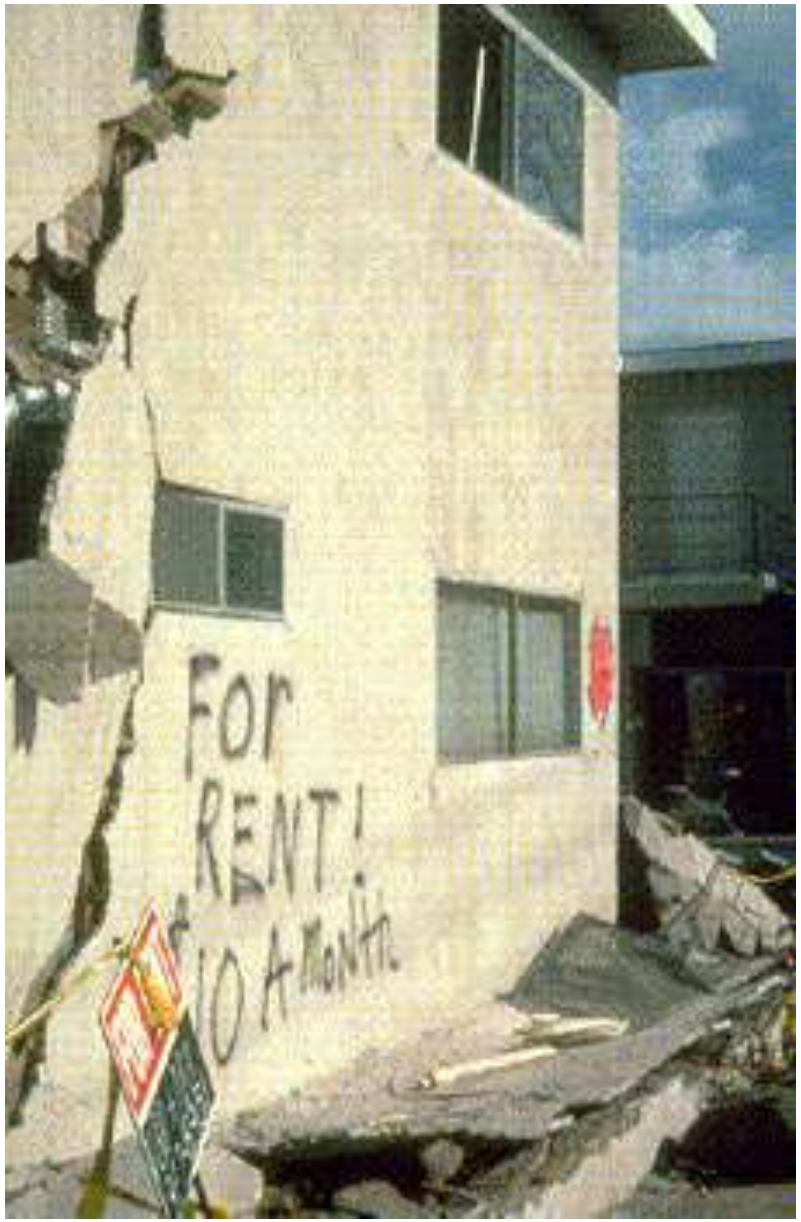
But all Walls still square.

Structure Triage Symbol:



Moderately Damaged Building

Broken Walls.



Fallen Decorative Work.

Moderately Damaged Building

Moderate (w/ this room classified Heavy).

(Avoid this room as chimney may collapse into it.)

S&R Objectives in Moderately Damaged Buildings

1. Evacuate the Mobile Minor and non injured.

2. Find, stabilize, extract each remaining living victim as found.

3. Find and free the Trapped and Buried.

Heavily Damage Building

Any of the Following:

Racked / "Creaking"

Any Collapse Roof, wall(s) or floor(s).

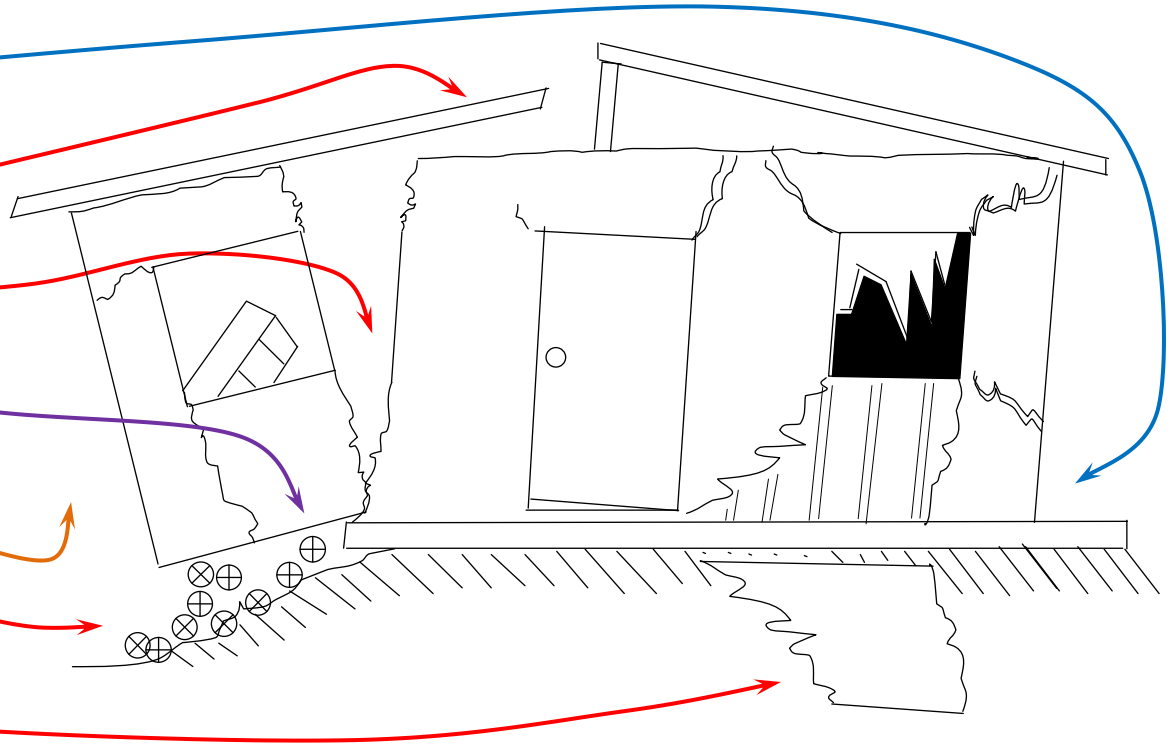
Wall, Floor or Roof Separation.

Tilt > 20°.

Out of Column > 20%.

Ground Failure.

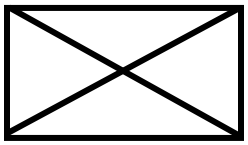
Shearing Failure.



Non-Structural Hazards:

- Heavy Smoke or Fire.
- Leaking Gas.
- Hazardous Materials.
- Rising or moving water

Structure Triage Symbol:



Heavily Damage Building

Heavily Damage Building

Heavily Damage Building

(Soft First Story building (open parking in place of a shear wall). First story collapsed.)

Heavily Damage Building

(Searchable Debris Field)

Heavily Damage Building

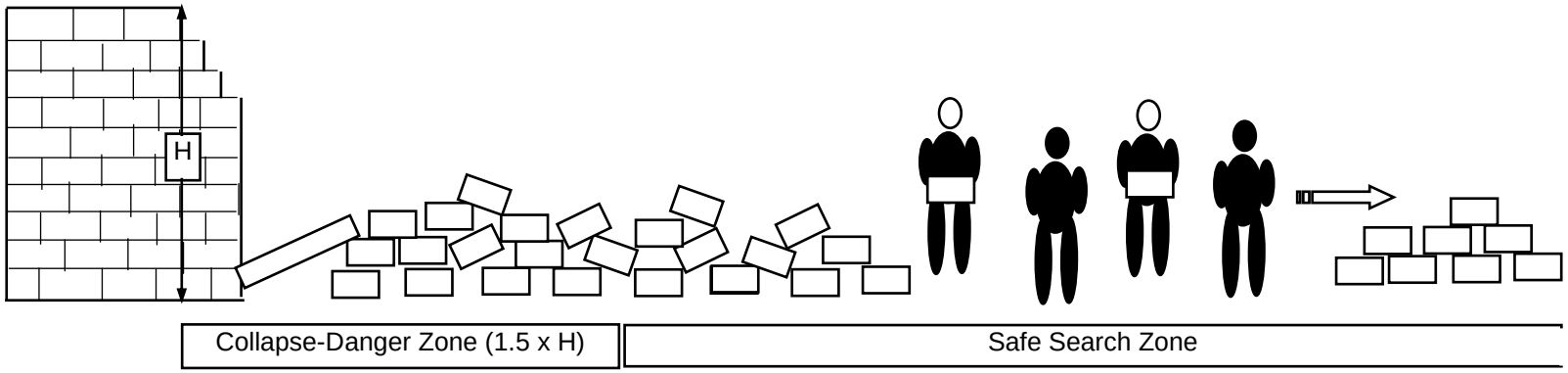
(Searchable Debris Field)

S&R Objectives for Heavily Damaged Buildings.

Cordon off. Warm others.

If safe,
Search debris field outside of Collapse-Danger Zone.

(Collapse-Danger Zone = 1.5 times Height of the portion left standing.)



S&R Objectives by Type Building Damage

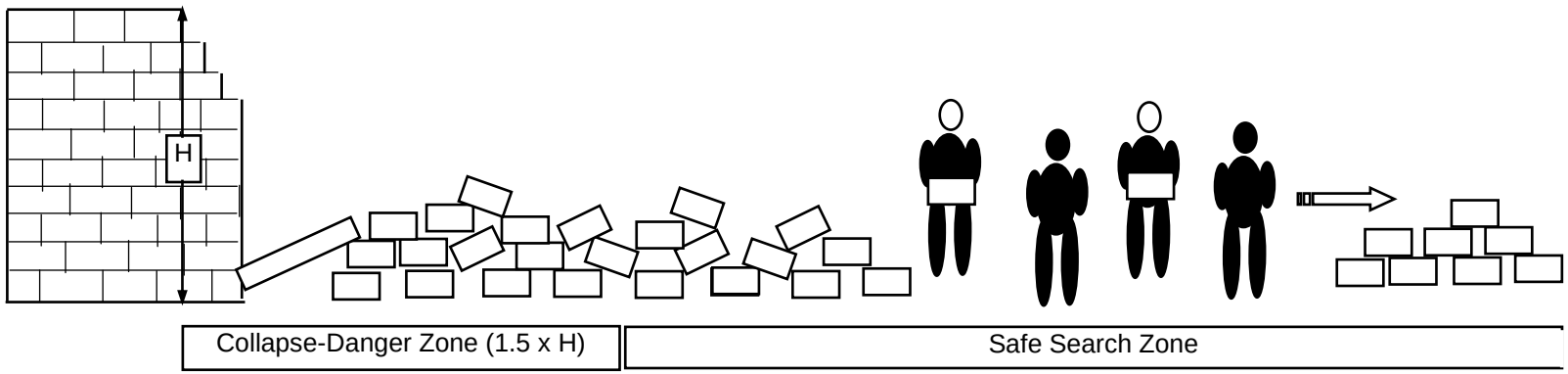
Light: Find, Stabilize, RPMs-Triage (prioritize) & Treat inside.

Moderate: Find, Stabilize, & Extract. (RPMs-Triage & Treat outside.)

Heavy: Cordon off. Warm others.

If safe,
Search debris field outside of Collapse-Danger Zone.

(Collapse-Danger Zone = 1.5 times Height of the portion left standing.)



Search & Rescue Overview

S&R Teams work under an *Incident Commander*.

- Serves as Safety Officer.

- Follows a safety checklist for each type incident.
(Checklists are in the CERT Field GuideBook, Section 2.)

S&R Teams dispatched when:

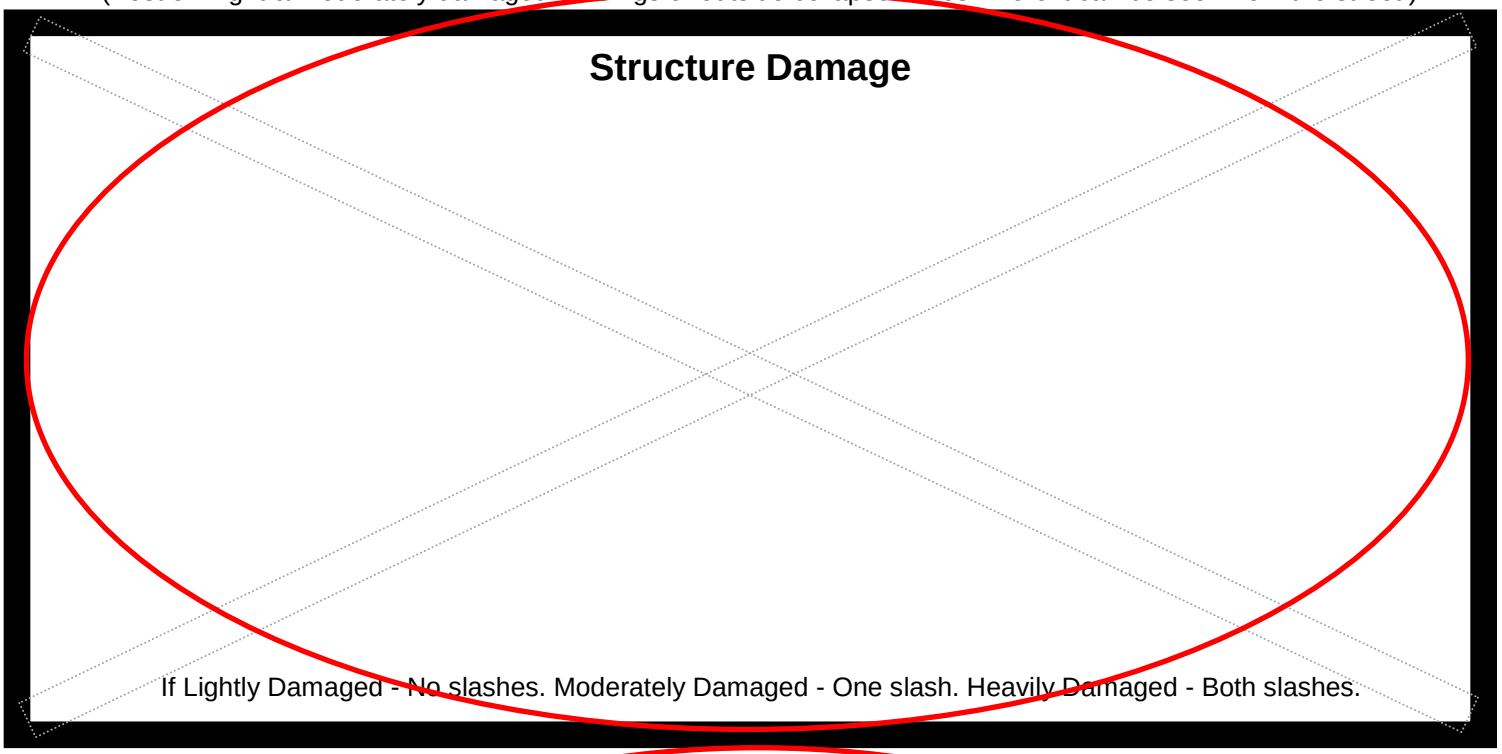
b) Damage Survey Team has determined that a damaged building was probably occupied when disaster struck but residents are not responding.

a) Property owner has pre-authorized HERO to check on them following a disaster by pre-signing a Search Request and Hold Harmless Agreement (HHA).

Building Marker

(Post on Light & Moderately damaged buildings or outside collapse zones where it can be seen from the street.)

Structure Damage



If Lightly Damaged - No slashes. Moderately Damaged - One slash. Heavily Damaged - Both slashes.

Search & Rescue Marker

Team 1

Date: _____ Time: _____

Usual occupants: ____

Suspected now: ____

Team 2

HHA Signed? __

Hazards:

Dog: Yes No

Hazmat: Yes No

Power line: Yes No

Electricity: On Off

Nat.Gas: On Off

Water: On Off

_____

Community Emergency Response Team

Team 3

Left In

OK: _____

Injured: _____

Trapped: _____

Dead: _____

Not Searched: _____

Team 4

Mark on S&R Entry or DS finds occupants OK or away.

Mark on S&R Exit or DS finds occupants OK or away.

Search & Rescue Procedure

1. Size-Up.

2. Search.

3. Rescue.

SIZE-UP

Structural Stability?

Interior Scan.

ha**Z**ards.

Entry Points.

-

Utilities.

Post Building-S&R Marker.

SIZE-UP

(**S**urvey Residents/Neighbors.)

Suit-Up

Structural Stability?

Interior Scan.

ha**Z**ards.

Entry Points.

-

Utilities.

Post Building-S&R Marker.

If no Building Marker (Damage Survey Team has not investigated this building),

Survey Residents for their needs.
Knock and Yell,
"This is your Emergency Response Team. Are you OK."
If you can walk come to ___.
If you can't walk, make noise."

If answered,
Ask if help is needed.

If not answered,
Survey Neighbors each side &/ across street to determine:

1. Was building occupied.
2. Is a key available.

SIZE-UP

Suit-Up.

Structural Stability?

Interior Scan.

ha**Z**ards.

Entry Points.

-

Utilities.

Post Building-S&R Marker.

Long-sleeve shirt and pants.
Helmet.
Helmet lamp.
Goggles.
N95 Particulate Mask. (2)
Leather Gloves.
Nitrile Gloves. (3 pair)
Knee pads.
Boots.
Vest.

- Notepad and pen.
- Building Markers. (1 yellow & 1 red.)
- People Marker.
- Door Stops. (2)
- Glow Sticks. (4)
- Penlight.
- Extra helmet lamp batteries.
- GuideBook/S&R Procedures/Pocket Ref.
- S.W.A.T. Tourniquet or pressure bandage.
- Tape (1”)
- Whistle.

SIZE-UP

Suit-Up.

Structural Stability?

Interior Scan.

ha**Z**ards.

Entry Points.

-

Utilities.

Post Building-S&R Marker.

Lightly Damaged. **GO**

- Broken Windows.

Moderately Damaged. **GO**

- Broken Walls.
- Tilting but not raked.
- Fallen decorative work.

Heavily Damaged. **STOP**!

- Racked. (Walls not square.)
- Total or partial collapse.
- Unstable ground or surface.
- Obvious structural instability.
- Heavy gas, smoke or fire.
- Flooded.
- Unreinforced Masonry (UMB).

SIZE-UP

Suit-Up.

Structural Stability?

Interior Scan.

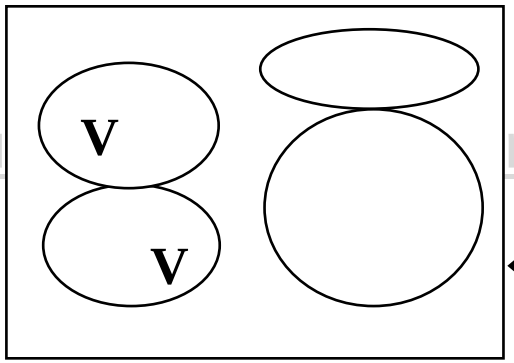
ha**Z**ards.

Entry Points.

-

Utilities.

Post Bu r.



"Good Samaritan" law is our Liability protection insurance.

Applies only at,

"the scene of an emergency."

Must see or hear a victim before forced entry is covered.

Locating victims before entry also important at Moderately Damaged buildings to reduce time required inside for search.

(A ladder or a pole-mounted cell-phone camera in "video" mode may be helpful.)

Draw a "Bubble Map".

SIZE-UP

Suit-Up.

Structural Stability?

Interior Scan.

ha**Z**ards.

Entry Points.

-

Utilities.

Post Building-S&R Marker.

Pet(s)?

Power line(s)?

Lose Overheads.

Heavy Gas, Smoke, Fire, Toxic Fumes?

Hazardous Materials?

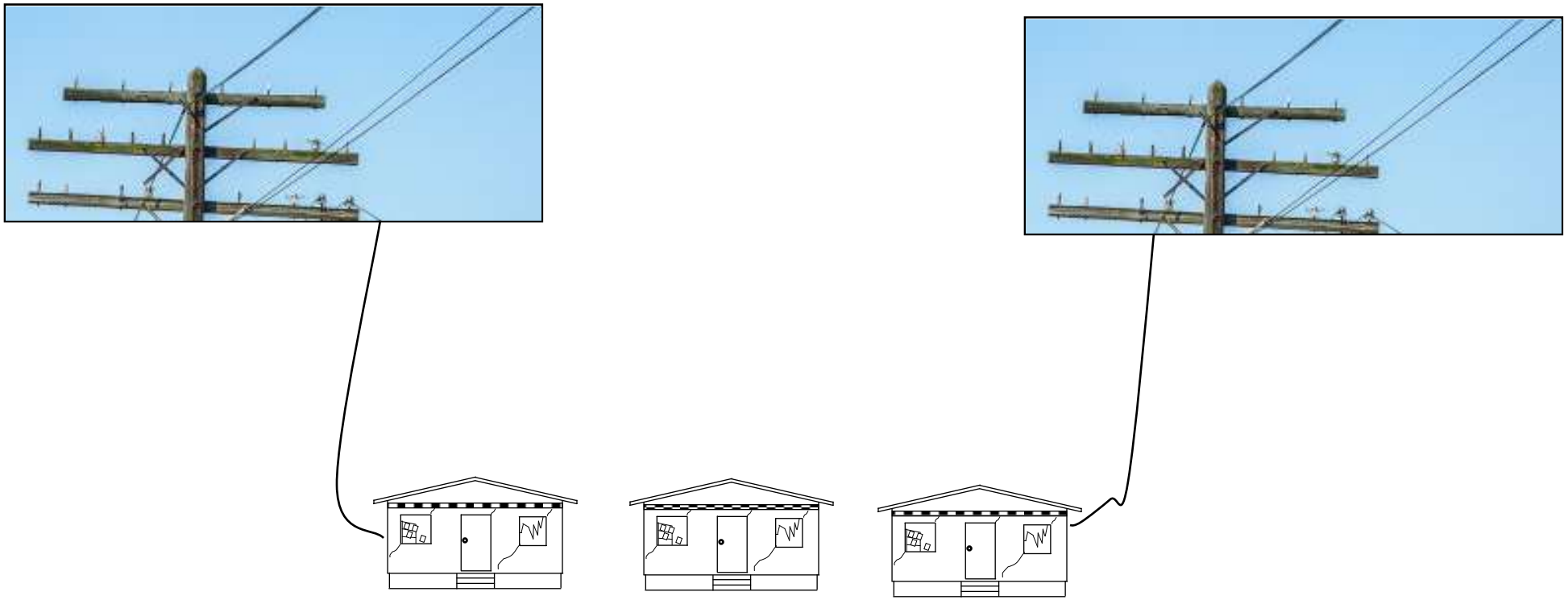
Heavy damage.

Sharps. (Nails, broken glass, etc.)

SIZE-UP

Power Lines.

Before getting within 50 feet of a power line easement, visually *check poles either side of assigned building for drooping wires*.
If present, avoid all building between poles.



SIZE-UP

Suit-up.

Structural Stability?

Interior Scan.

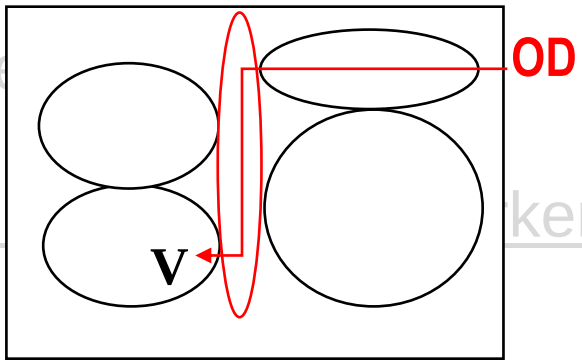
ha**Z**ards.

Entry Points.

-

Utiliti

Post



ker.

If building locked and no key, search for:

1. open door,
2. open window,
3. broken window,
4. small door/window pane in rear within arm's reach of an inside lock (break),
5. exterior-swinging door (remove hinge pins),
6. sliding door (pry open at latch).

<u>Moderately Damage Building</u>

"Bubble Map" as much of the interior as you can see for exterior, including best route/path to victim(s) to reduce time required inside for searching.

SIZE-UP

Suit-up

Structural Stability?

Interior Scan.

ha**Z**ards.

Entry Points.

-

Utilities.

Post Building-S&R Marke

Depends on conditions found.

Lightly Damaged Building.				Moderately Damaged Building	Heavily Damaged Bldg.
If:	**Fire**	**Gas** smell or meter spinning	**Flooding**	**Shut off All** before entering building*. (Force gate if necessary.)	**Shut off All** if safe to reach.
shut off*:	1. Electric. 2. Gas.	1. Electric. 2. Gas. 3. Vent building.	1. Electric. 2. Water.		

* If you cannot shut off the indicated utilities (dogs, powerlines, etc.), do not enter building.

Shut off utilities in alphabetic order.
1. Electricity.
2. Gas.
3. Water.

SIZE-UP

Suit-up.

Structural Stability?

Interior Scan.

ha**Z**ards.

Entry Points.

-

Utilities.

Post Building-S&R Marker.

For Moderately damaged buildings, make a diagonal slash on the wall before entry to each building, corridor and room.

Cross it, making an X, on exit after all victims are removed. This tells FD this building has been cleared.

For Lightly damaged buildings, tape the Building - Search & Rescue Marker to the building and record your findings there when finished. This tells FD this building has been checked.

Damage Survey Teams will post these on buildings they investigate. Slash that.

Building Marker

(Post on Light & Moderately damaged buildings or outside collapse zones where it can be seen from the street.)

Structure Damage

If Lightly Damaged - No slashes., Moderately Damaged - One slash, Heavily Damaged - Both slashes.

Search & Rescue

Mark on S&R Entry or DA finds occupants OK or away.

Mark on S&R Exit or DA finds occupants OK or away.

Team 1

Date: _____ Time: _____

Usual max. occupants: ____

Suspected now: ____

Team 2

HHA Signed? ___

_____

Community Emergency Response Team

Team 3

Actions:___

Elec Off? ___

Gas Off? ___

H^2O Off? ___

Treated: ___

Trans: ___

Team 4

Left In

OK: _____

Dead: _____

Trapped: _____

Hazards: _____

Not Searched: _____

SEARCH

Proceed to SEARCH if either:

a) Victim(s) are seen or heard inside during Size-Up.

b) "OK to Force Entry" ✓ (a Search Request and **H**old **H**armless **A**greement was pre-signed)**.**

c) Neighbor knows victim(s) are inside and assumes responsibility for damages. (Have them sign Request & Hold Harmless Agreement.)

SEARCH

Search Tasks:

Shout out the Mobile (the "Minor" injured).
Entry. Find or Force. Clear & Mark..
Alert yourself & victims.
Right-to-Rescue, Left-to-Leave.
Check, Chock, Close.
Halt on Heavy.

When a victim is found, give them **SPACE**.

Size-up victim.
Permission to help? If no response, check if …
Alive? Check ABCs of live.
Check for **C**ritical bleeding, **C**-spine injury, **C**racked bones?
Emergency care. Stop bleeding. Stabilize C-spine, fractures.

SEARCH

Shout out Mobile Minors.

Entry. Find or Force,
Clear & Mark.

Alert - To hazards.
- Victims.

Right-to-Rescue,
Left-to-Leave.

Check, Chock, Close.

Halt on Heavy.

"This is your Emergency Response Team. If you can walk come to me. If you can't, call out or make noise."

(Those who can walk are assumed at this point to have no or only minor injuries.)

This accomplishes several things:

1. Announces who you are.

2. May get you entry without forcing.

3.a Gets the mobile casualties out of Moderately damaged buildings.

3.b Gets people to guide you in Lightly damage buildings.

SEARCH

Shout out Mobile Minors.

Entry. Find or Force.
Clear & Mark.

Alert - To hazards.
- Victims.

Right-to-Rescue,
Left-to-Leave.

Check, Chock, Close.

Halt on Heavy.

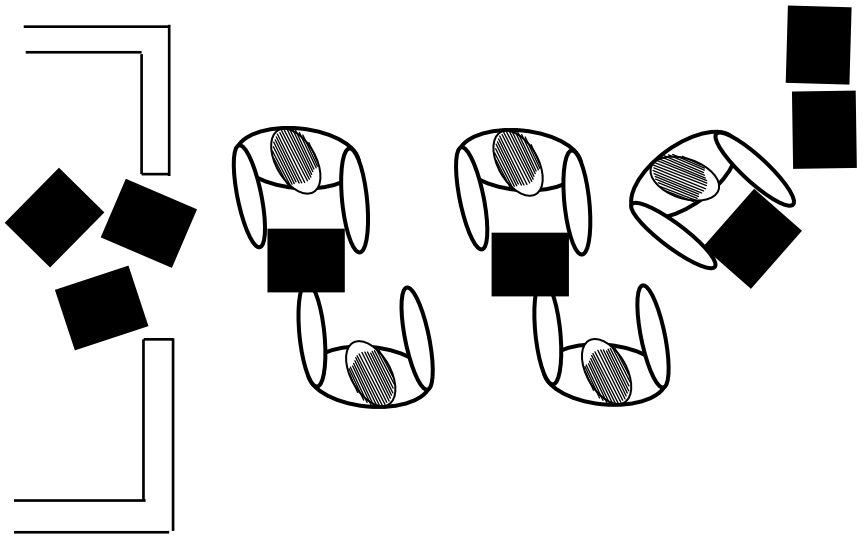
1. Open door?
2. Key? Damage Survey Team? Neighbors?
3. Open window?
4. Broken window?
5. Small door/window pane (in rear) within arm's reach from an inside lock.
   Break. Cover edge before reaching in.
6. Sliding door.
   Will the non-sliding side slide?
   Pry away from jam stripping latch plate.
7. Exterior-swinging door (commercial),
   Pry jam away from door at latch.
   Remove hinge pins. (Rare.)
   Saw off hinges (if no gas leak).
8. Store-front swinging door.
   Pry door up, pulling lock pin out of sill.
9. Interior-swinging door.
   Halligan tool, axe, sludge, kick.

SEARCH

Shout out Mobile Minors.

Entry. Find or Force
Clear & Mark.

1. Clear an Exit path.



Alert - To hazards.
- Victims.

Right-to-Rescue,
Left-to-Leave.

Check, Chock, Close.

Halt on Heavy.

2. Mark with light (flashlight, glow-stick, etc.) illuminating exit point ceiling.

SEARCH

Shout out Mobile Minors.

Entry. Find or Force.
Clear & Mark.

Alert - To hazards.
- Victims.

Right-to-Rescue,
Left-to-Leave.

Check, Chock, Close.

Halt on Heavy.

Before entering a corridor or room,

Stop, Look, Listen and Think,

"What can harm me?"

Loose overheads.	- Wear helmet. Avoid.
Broken glass.	- Wear leather gloves.
Fallen plaster (nails).	- Wear sturdy shoes/boots.
Unstable floor.	- Test each step.
Exposed wiring.	- Is electricity off? Avoid.
Flooding.	- Is electricity & water off?
Gas, heavy smoke.	- Leave.
Hazmat fumes (Bleach + Ammonia).	Hold breath. Leave.
Any collapse/racking.	- Leave.

SEARCH

Shout out Mobile Minors.

Entry. Find or Force.
Clear & Mark.

Alert - To hazards.
- Victims.

Alert victims to your presence as you go.

"Is anyone in here?"

Then listen.

Right-to-Rescue,
Left-to-Leave.

Check, Chock, Close.

Halt on Heavy.

SEARCH

Shout out Mobile Minors.

Entry. Find or Force.
Clear & Mark.

Alert - To hazards.
- Victims.

Right-to-Rescue,
Left-to-Leave.

Check, Chock, Close.

Halt on Heavy.

2. Do a Systematic Search.

Follow the Right-hand walls going in to Rescue.

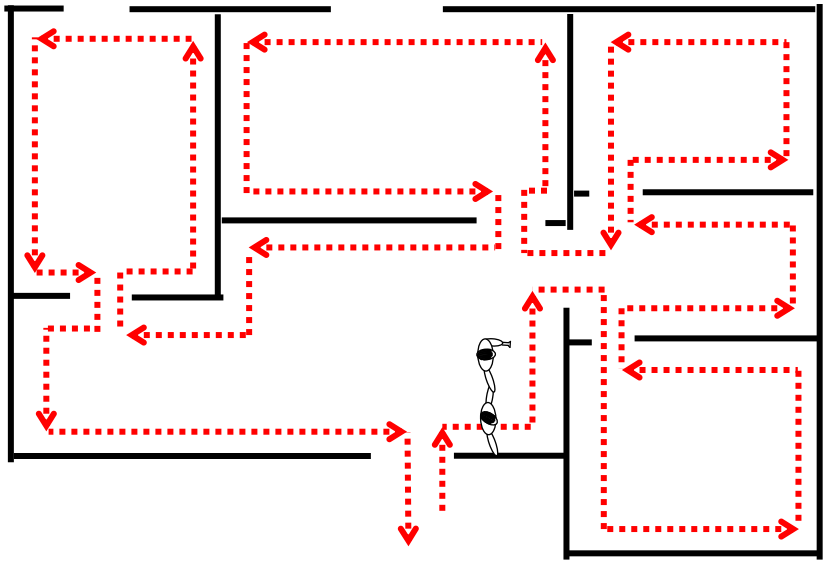
If lost, reverse direction, follow the (now) Left-hand wall out.

"**Right**-hand on wall **to Rescue**,
Left-hand on wall **to Leave**.

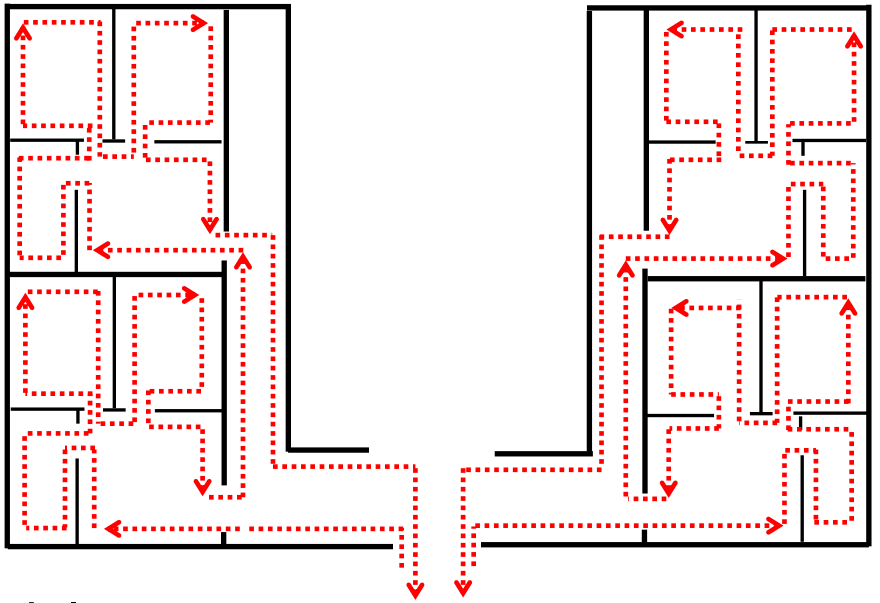
In Moderately damaged buildings,
Mark a slash (***/***) on wall before entering each corridor and room.
Cross it (**X**) after all living victims removed.

Systematic Search

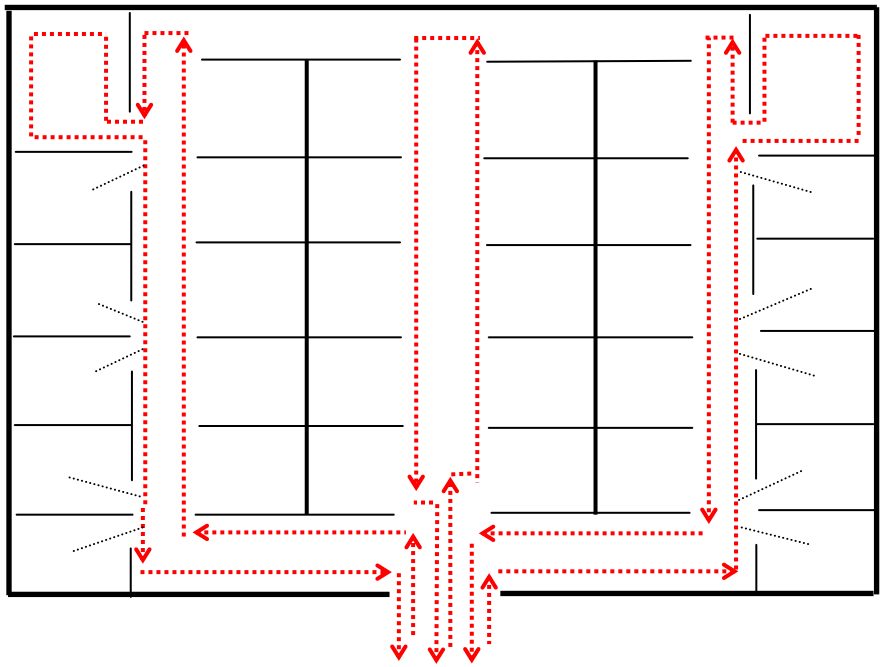
House



Apartment / Condo

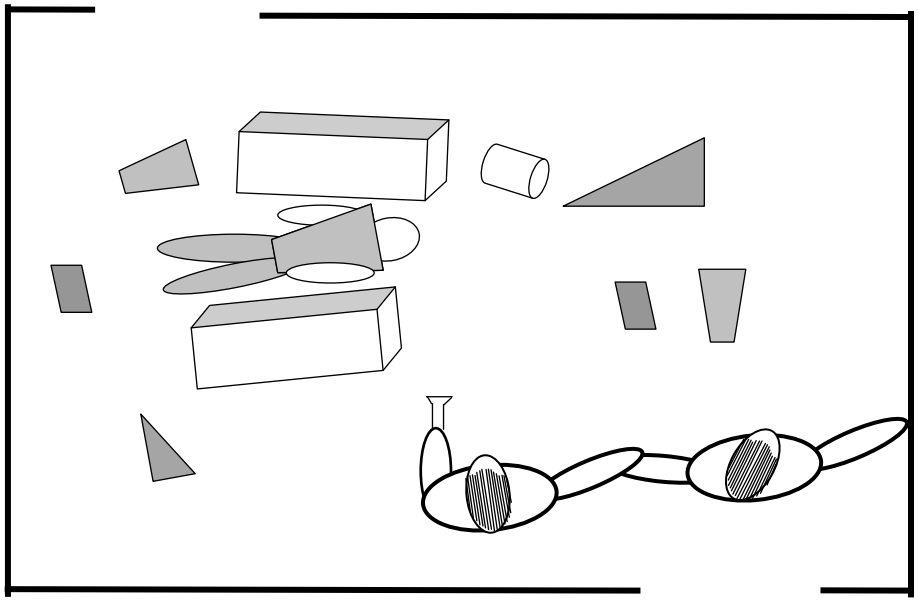


Commercial

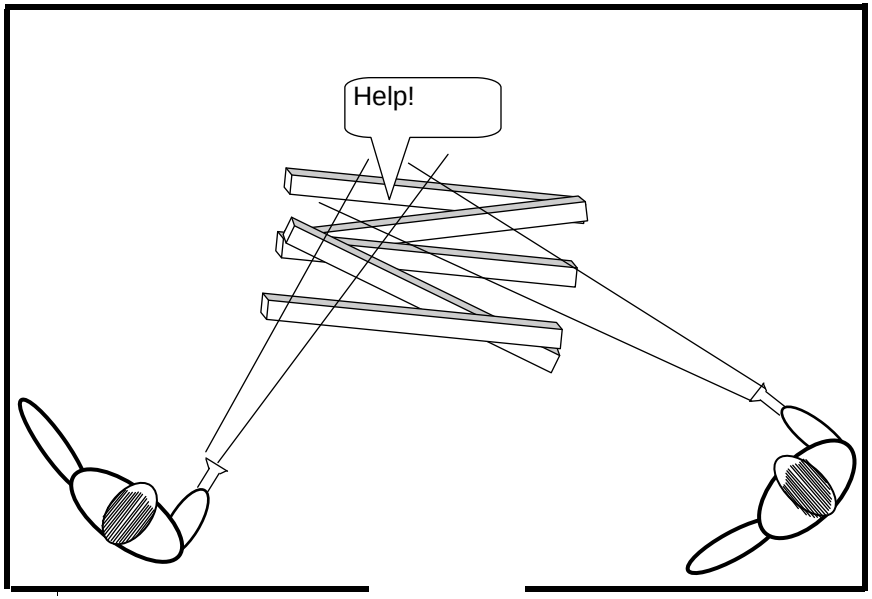


Systematic Search

Maintain orientation by maintaining contact with Walls.



Find hidden victims via Triangulation.



SEARCH

Shout out Mobile Minors.

Entry. Find or Force.
Clear & Mark.

Alert - To hazards.
- Victims.

Right-to-Rescue,
Left-to-Leave.

Check, **C**hock, **C**lose.

Halt on Heavy.

Check closed doors for heat (using the back of your hand) before opening.

If hot, leave them closed.

Chock doors open on enter.
(Prevents being trapped in aftershocks.)

Close doors on exit.
(Increases building's structural strength.)

SEARCH

Shout out Mobile Minors.

Entry. Find or Force.
Clear & Mark.

Alert - To hazards.
- Victims.

Right-to-Rescue,
Left-to-Leave.

Check, Chock, Close.

Halt on Heavy.

Terminate search and exit section **on** discovery of **Heavy Damage**:

- Racked walls.
- Any Collapse.
- Structural Instability ("Creaking").
- Instability (e.g. floor movement).
- Heavy Smoke or Fire.
- Leaking Gas.
- Hazardous Materials.
- Flooding.

SPACE

Size-up victim.

Permission/LOC?
If responsive, check Level Of Consciousness.
If un-responsive, check if …

Alive? **Check** **A**BCs of Life.

Critical C's Check. **C**-spine injury, **C**racked bones? **C**ritical bleeding.

Emergency care. Airway. Bleeding. C-spine, bone fractures.

SPACE

Size-up victim.

Permission/LOC?

Alive?

Critical **C**'s. **C**heck

Emergency care.

Before approaching a victim look for hazards to you:
- Loose overheads.
- Sharps (glass, nails etc.)
- Furniture that can shift.

- If possible, approach so victim can see you approaching.

SPACE

Size-up victim.

Permission/LOC?

Alive?

Critical **C**'s. **C**heck

Emergency care.

(Video tape this with you cell phone/pole-cam.)

"Hi. What's your name? What happened?"

If patient is Alert (LOC = A),
"We're Good Samaritan volunteers, but not medical professionals. Do you want our help?"

If "What do you mean?",
"It means you can't sue us if we hurt you."

If "Yes", go to *Critical C's Check*-1.

If "No", go to next victim or leave.

If no response, tap shoulder & shout.

If response, LOC = V, Response to Voice.
Go to *Critical C's Check-2*

If no response, pinch finger-nail bed.

If response, LOC = P, Response to Pain.
Go to *Critical C's Check*-2

If no response, LOC = U, Unresponsive.
Go to *Alive?*

SPACE

Size-up victim.

Permission/LOC?

Alive?

Critical **C**'s. **C**heck
1. C-Spine
2. Cracked Bone,
   Critical Bleeding

Emergency care.

Check ABC's of Life.

(Done only on Unresponsive victims.)

Airway. Open mouth. (finger scissor)
Finger swipe out any debris.

Breathing. Look, Listen & Feel for breathing.

Circulation. Check Carotid pulse.

IF pulse & breathing, assume Head & Spinal injury.
Go to *Critical C's Check-2*.

If pulse but not breathing,
Open Airway via **Jaw-Thrust.**

If still no breathing,
Open Airway via **Head-Tilt-Chin-Lift.**
(Give a child 2 rescue breaths.)

If still not breathing,
mark "**DEAD**". Continue search.

If no pulse and no breathing,
mark "**DEAD**". Continue search.

SPACE

Size-up victim.

Permission/LOC?

Alive?

Critical **C**'s. **C**heck

Emergency care.

Do before moving a patient.
Tell patient what you are going to do.
Have Partner manually stabilize head.

1. **C-Spine injury?**

   If LOC not Alert (V,P,U), assume possible injury.
   Ask patient to move each hand & foot.
   Touch each hand & foot and ask which is touched.
   Motor & Sensation deficit any extremity = injury.

2. **Cracked Bones?**

   Do Rapid Trauma Check for:
   - **Deformity**
   - **Open Wounds (Bleeding)**
   - **Tenderness**
   - **Swelling.**

Critical Bleeding?

Check your gloves for blood as you go.

SPACE

Size-up victim.

Permission/LOC?

Alive?

Critical **C**'s. **C**heck

Emergency care.

1. Stop any rapid bleeding:

Direct pressure via gloved-hand.
Add 4x4 gauze sponge, or several 4X4 pads.

If bleeding stops, secure w pressure bandage:
a. WoundStop / Israeli Bandage,
b. Gauze sponge & ACE bandage, or
b. SWAT-T as pressure bandage. *video*

If not, then if wound is on:
Limb,
Apply SWAT-T as a tourniquet.
Write time applied on patient.
Torso,
Pack with Z-Pak / Combat gauze,
Add pressure bandage. *video*

SPACE

Size-up victim.

Permission/LOC?

Alive?

Critical **C**'s. **C**heck

Emergency care.

2. Spinal Motion Restriction.

If Head Mid-lined, use Rigid C-Collar.

If Head is rotated, use Soft C-Collar.

(If stabilizing fractures requires equipment you don't have, do during RESCUE.)

SPACE

Size-up victim.

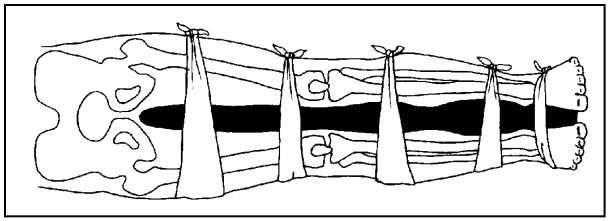
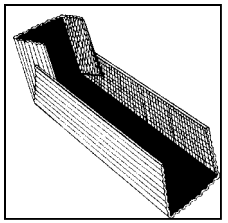
Permission?

Alert? **A**live?

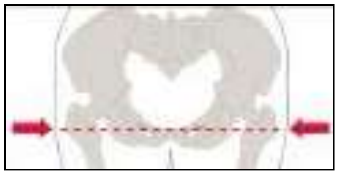
Critical **C**'s. **C**heck

Emergency care.

3. Immobilize major fractures.
   Leg via Vacuum-Splint, Body-Splint, Cardboard-splint.

Pelvis via SAM Pelvic Sling (or SWAT as a sling).



Arm(s) via swathe, BB strap, pt. holds.

Spine, Hip, Femur via Fasplint Full-Body.

SPACE

Size-up victim.

Permission/LOC?

Alive?

Critical **C**'s. **C**heck

Emergency care.

3. If LOC = V, P, or U, Maintain an Airway.

If you must leave the victim, roll them into **H**igh **A**rm **I**n **N**eck **E**xposed **S**pine (HAINES) position. (Breathing trumps risk of paralysis.)

Demo

HAINES Position

SPACE based on LOC.

Level Of Consciousness:	Alert & Oriented	Responds to Voice	Responds to Pain	Unresponsive
PRIMARY ASSESSMENT - S&R				
Check ABC's for Signs of Life?	No	No		Yes
- Check Airway	No	No		Clear mouth. Open Airway.
- Check for Breathing	No	No		Yes,
- Check for Circulation	No	No		Yes
Critical C's Checks?				
C-Spine Check? Test peripheral Motor, Sensation. (Deficit = spinal injury.)	Yes	No, patient's answers are unreliable.		No, patient can't respond.
Crack Bones Check?	Yes	Yes		Yes
Critical Bleeding Check.	Yes	Yes		Yes
Emergency Care?				
Use oro- or naso- adjunct to maintain airway?	No.	No.		Yes if required to maintain Airway.
Spinal Motion Restriction: -Manually during Critical Checks. - via soft C-Collar if head rotated(?) - via rigid C-collar if head midlined. - via BB pads & tape if no collar.	Yes if peripheral Motor, Sensation deficit.	Yes, pt. unreliable due to distracting injury/condition.		Yes, can't clear.
Logroll prone pt. supine?	Yes	Yes		Yes
Stop Critical Bleeding?	Yes	Yes		Yes
Stabilize Cracked Bones?	Yes	Yes		Yes

SPACE

Summary

Size-up victim.

Permission/LOC? If Unresponsive, check if ...

Alive?

Check 3 **C**'s., 1. **C**-spine? 2. **C**racked bones, **C**ritical bleeding?

Emergency care: 1. Stop bleeding. 2. Stabilize C-spine & fractures.

RESCUE

Rehearse

Extraction.

Stabilize fractures, dislocations.

Collect Pt's essentials.

Upload Patient.

Extract.

RESCUE

Special Situation

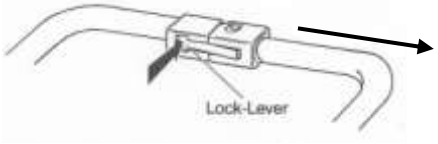
If

1) building is Moderately damaged, and
2) you have a Scoop Stretcher, and
3) victim is in supine position (on their back) in a debris-free area,

scoop victim, secure and extract now!

Loading Patient *:

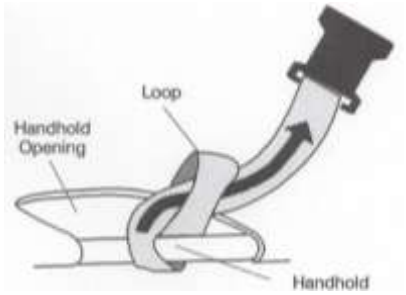
1. Unlock two sides of stretcher.



2. Carefully slide each half under patient.

3. Re-join stretcher, at head, then foot.

4. Attach patient restraints.



RESCUE

Rehearse

Extraction.

Stabilize fractur

Collect Pt's esser

Upload Patient.

Extract.

Plan your rescue (outside of Moderately Damaged buildings) based on patient's injuries, equipment, personnel and space available.

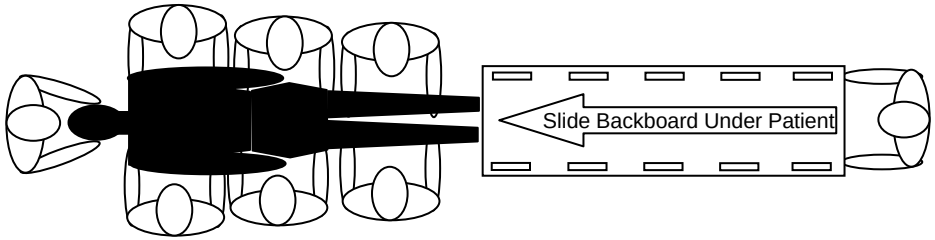
Extraction Methods:

Method: / Injury:	Scoop Stretcher (2-3 people) 1 holds head 2 scoop pt.	Lift to Backboard (4-8 people) (High Debris) 1 holds head 3 lift Torso, or 6 lift Body. 1 slides bkbd.	Logroll to Backboard (4 people) (High Debris) 1 holds head 3 roll pt. up 1 pos'n bkbd 2 roll pt. down.	Chair Carry (2 people) or Human Crutch	Direct Carry. (2 people) Strap or Georgia-Street Carry
Head Neck C-Spine Unconscious	1	2	3		
Shoulder, Chest, Rib	2	3	4 to good side.	1	
Arm, Hand	2			1	
Pelvis, Hip, Upper Leg	1	2	3 to good side.		
Lower Leg Foot	1			2	
Other or **Emergency**					1

Lift to Backboard

8 Rescuers

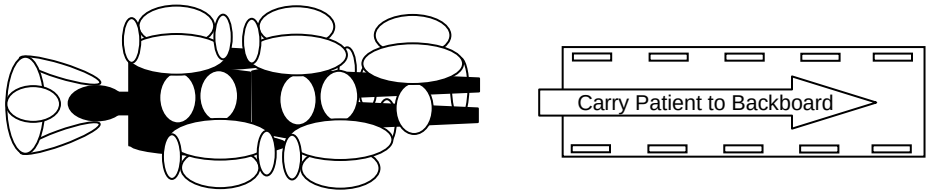
6+2 Pt. Lift
- BB Slide



6 Rescuers

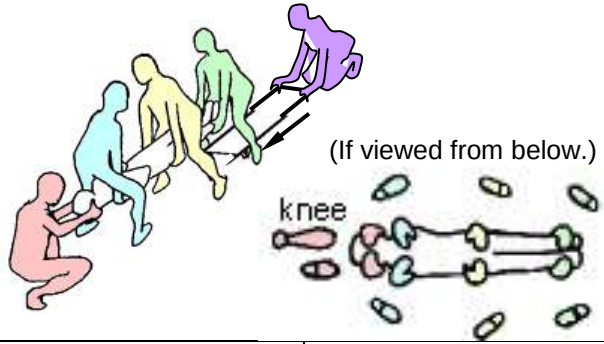
5+1 Pt. Lift
& Carry

1. Start on knees to scoop patient, 2) All rise to Right Foot. 3. Bring Left foot under. 4. All Stand & carry patient. "Bridging" Placing your head on partner's shoulder increases lifting power.

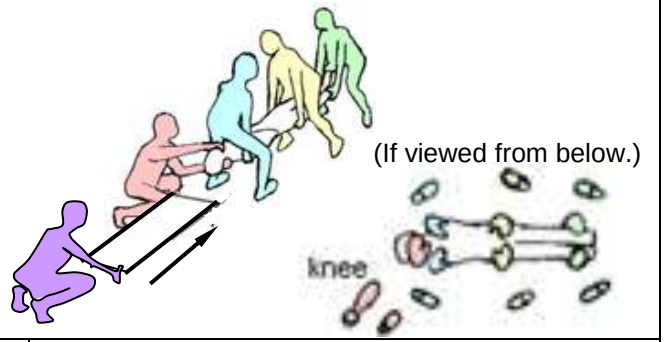


5 Rescuers

Lift patient 6". Slide Backboard under from feet.

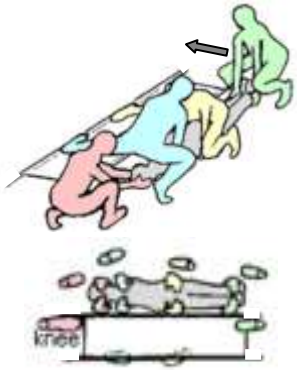


Lift patient 6". Slide Backboard under from head.

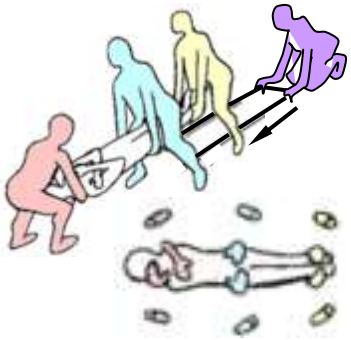


4 Rescuers

Lift & shift patient sideways.



3 lift patient. 1 slides board.



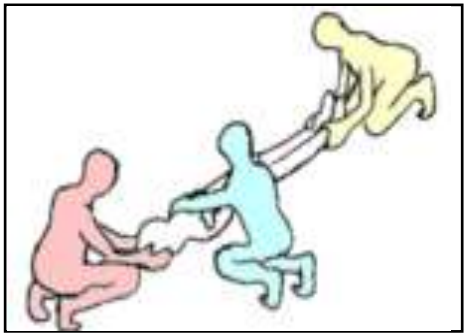
2+2 Torso Lift - Backboard Slide
3 rescuers lift head, torso and hips.
1 rescuer Slides backboard under patient from head.

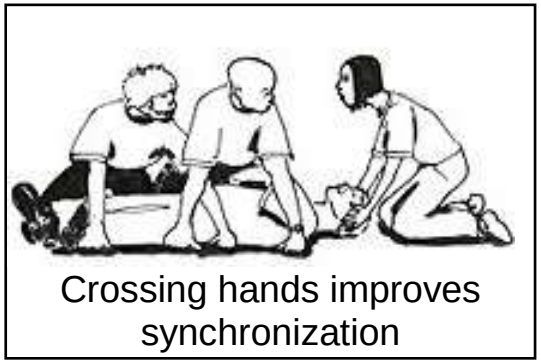
Easiest on Patient. Greatest resource and working space.

Logroll to Backboard

1. Manually stabilize head.

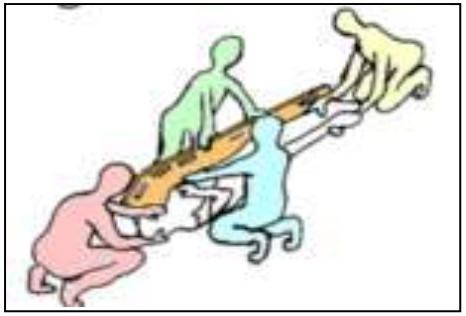
2. Roll patient up 90 degrees





Crossing hands improves synchronization

3. Position Backboard.



4. Roll patient down onto Backboard.

5. Add “Head Blocks”
   (rolled towels, tape, etc.)

Harder on Patient. **Easiest on Rescuer.** **Less working space.**

Strap Lift & Carry

(Extrication from tight places.)

Place Lift Strap.

Method A.

Method B.

Lift and carry patient.

Easy on Patient. **Hardest on Rescuer.** **Least working space.**

RESCUE

Rehearse

Extraction.

Stabilize fractures.

Collect Pt's essentials.

Upload Patient.

Extract.

Wear mask, goggles, Nitrile or latex gloves.

C-Spine.
If victim can't move and feel both hands and feet, has posterior neck midline tenderness, or is unconscious, assume spinal injury. In:

- *Lightly Damage Structure,* do not move pt.

- *Moderately Damage Structure,*
  Keep head in position found relative to body, manually first, then with Head Blocks or rolled towels and tape across forehead & chin preventing head rotation & lifting. (Do not X tape. This would prevent head from sliding with body if backboard tilts, causing neck extension.)

  Use 6-person Body Lift to Full-body Vacuum Splint. Otherwise, apply C-Collar for Logroll.

Major **Fractures**. Immobilize:
Angulated limb - Vacuum splint.
Arm - swathe, strap, pt. holds or waist band.
Leg - pad & strap bad leg to good leg.
Pelvis - SAM Pelvic Sling Splint, or …
or Hip: - 6-person Body Lift to Full-body Vacuum Splint.
- or backboard.

RESCUE

Rehearse

Extraction.

Stabilize fractures.

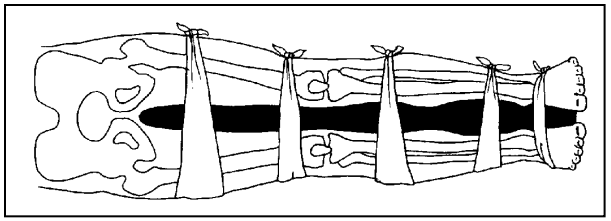
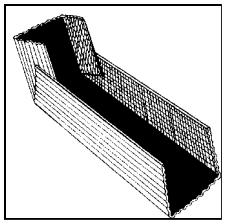
Collect Pt's essentials.

Upload Patient.

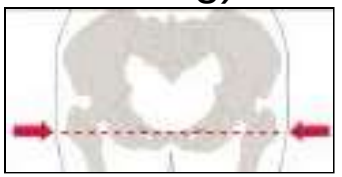
Extract.

3. Immobilize major fractures.

Leg via Vacuum-Splint, Body-Splint, Cardboard-splint.

Pelvis via SAM Pelvic Sling (or SWAT as a sling).



Arm(s) via swathe, BB strap, pt. holds.

Spine, Hip, Femur via Fasplint Full-Body.

RESCUE

Rehearse

Extraction.

Stabilize fractures.

Collect Pt's essentials.

Upload Patient.

Extract.

If patient or companion is conscious, ask if patient needs meds or medical equipment. If so, where are they?

Retrieve and bag.

If patient is unconscious, check for Medical ID tag. Look around and try to find:

- Medicines. Check:
  - Bathroom medicine cabinets, counters.
  - Bedroom night stands.
  - Kitchen counters.
- Medical equipment, (e.g. Oxygen tank.)
- Bottle water. (Bring up to 3 gallons.)
- Canned food (Bring up to 9 cans).

RESCUE

Rehearse

Extraction.

Stabilize fractures.

Collect Pt's essentials.

Upload Patient.

Extract.

Use the Lift or Roll Rehearsed Earlier.

a. 6-person Full-Body Lift - BB Slide (8 total).
b. 2-person Torso Lift - BB Slide (4 total).
c. Logroll (4 total).
d. Strap Lift and Carry.
e. Chair Carry.
f. Human Crutch.
g. Georgia Street (2-person Extremity Carry.)

Strap Patient.

For Extraction, strap patient under arms at waist and below knees to prevent sliding toward feet while going down stairs.

(For transport, restrain patient across shoulders to prevent sliding toward head during braking and stopping.)

Backboard Setup

Extraction Setup.

Place upper restraint high under armpits to prevent patient sliding down when being carried down stairs or slopes.

Waist Restraint.

For hip / leg fractures, secure good leg to backboard. Tie bad leg to good leg.

Lower restraint just below knees.

Transport Setup.

Run upper restraints over shoulders, cross at chest, to prevent patient sliding forward on braking.

Ensure chest Restraint does not inhibit breathing.

For Spinal injury, hip or leg fractures, place vacuum-splint mattress on backboard before placing patient. Form to most comfortable position before pumping out air.

RESCUE

Rehearse

Extraction.

Stabilize fracture limbs.

Collect Pt's essentials.

Upload Patient.

Extract.

Extract Patient.

Moderately Damaged Building

Extract ALL occupants.

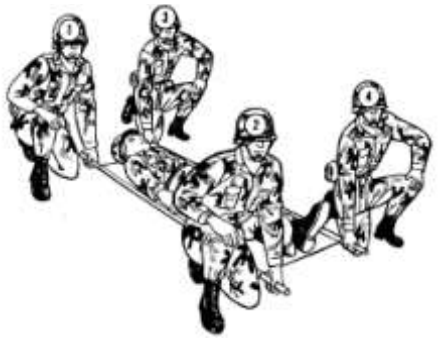
Lightly Damage Building

Extract those requiring transport to hospital (when a hospital opens or become accessible).

Bend at your hips, not your waist.
Lift with your legs, not your back.

Lifting & Carrying Stretchers and Backboards.

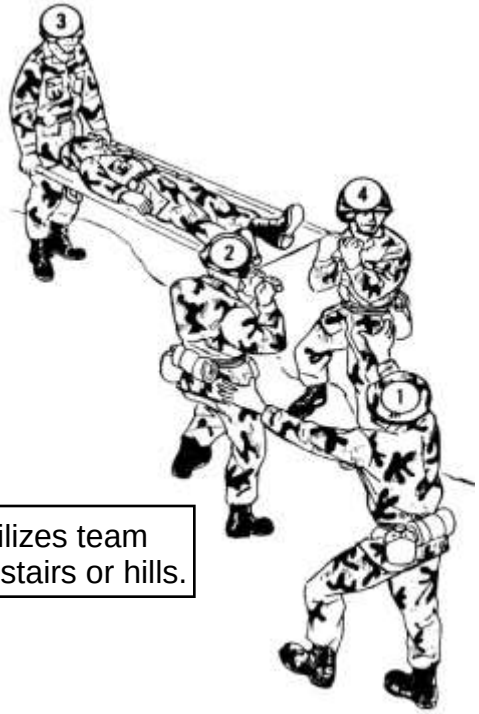
Lifting Patient.



Place hand on knee to push up.

Carrying patient thru narrow passage.

... over rough terrain.



Leader stabilizes team going down stairs or hills.

RESCUE

Rehearse **E**xtraction.

Stabilize any fractures.

Collect Pt's essentials.

Upload Patient.

Extract.

Report.

Repeat. (for all non-trapped)

Release the Trapped.

Report to IC on each exit:

- Areas searched, remaining.
- Victims found, removed, remaining.
- Pets seen.
- Hazards.

RESCUE

Rehearse **E**xtraction.

Stabilize any fractures.

Collect Pt's essentials.

Upload Patient.

Extract.

Report.

Repeat. (for all non-trapped)

Release the Trapped.

RESCUE

Rehearse **E**xtraction.

Stabilize any fractures.

Collect Pt's essentials.

Upload Patient.

Extract.

Report.

Repeat. (for all non-trapped)

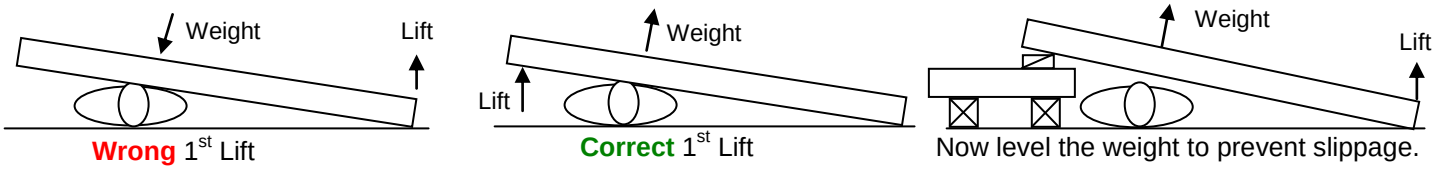
Release the Trapped.

Release the Trapped. GuideBook procedure d. Cribbing and Shoring

Cribbing is the process of stabilizing, then lifting, and shoring up an object too heavy to be lifted by hand, in order to free a trapped victim. Follow these steps:

1. Determine if safe to approach. Determine if victim is still alive by checking radial pulse. (Victim may be unable to breath.)

2. Plan the lift. Although you may have to lift from more than one side before freeing the victim, the first lift must take weight off victim's chest to free breathing capability.



Wrong 1st Lift — **Correct** 1st Lift — Now level the weight to prevent slippage.

3. Secure the side NOT TO BE LIFTED with wedges. (See Step numbers inside Figure 1 and 3 below.)

4. If the side to be lifted is already off the ground, build two box cribs under that side. Two corners of each box should be under the object to be lifted. Use 4x4's for bottom layer(s), if possibly, and 2x4's for the top layer(s) if 4x4's won't fit. Stack the object-contact member 1" toward inside of box. (See Figure 2.) Max. height allowed equals the width of the box crib's base.

You can stack a maximum of 2 members in the same directions to fill in a gap. The top member should be parallel with side to be lifted. If this arrangement can not be achieved with current crib arrangement, rotate the crib ¼ turn (90°) so it can.

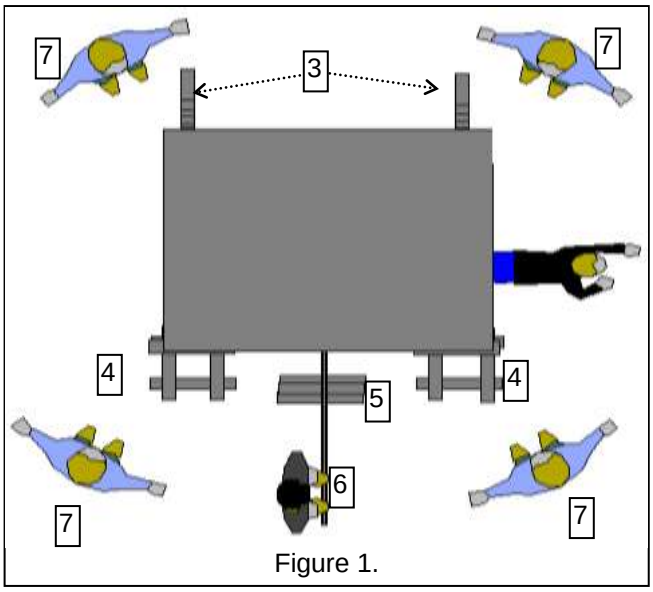


Figure 1.

5. Build a solid "pyramid" fulcrum.

6. Keeping hands and fingers on top of bar, lift the object enough to add one 2x4 to the box cribs on that side.

7. When all four corner cribbers raise their hands indicating that their box crib is in place and their hands are clear, lower object.

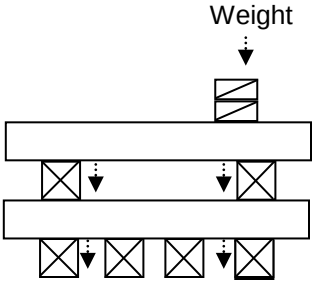
8.Repeat Steps 6 & 7. On the third lift, replace 2x4's with one 4x4.

9. If victim is not yet free, repeat Steps 6, 7 & 8 on the other side.

10. If victim is not yet free, repeat Steps 6, 7 & 8 on the original side.

11. When the victim is freed, lower the object for safety and for material reuse by reversing the above process.

Figure 2.
Setting the piece that contacts the object 1 or 2 inches (but no more than 4") toward the inside of the box crib will transfer weight to all the corners, keeping the box crib together and stable.



Use a solid base on dirt or soft asphalt. **Max. height** = width of base.

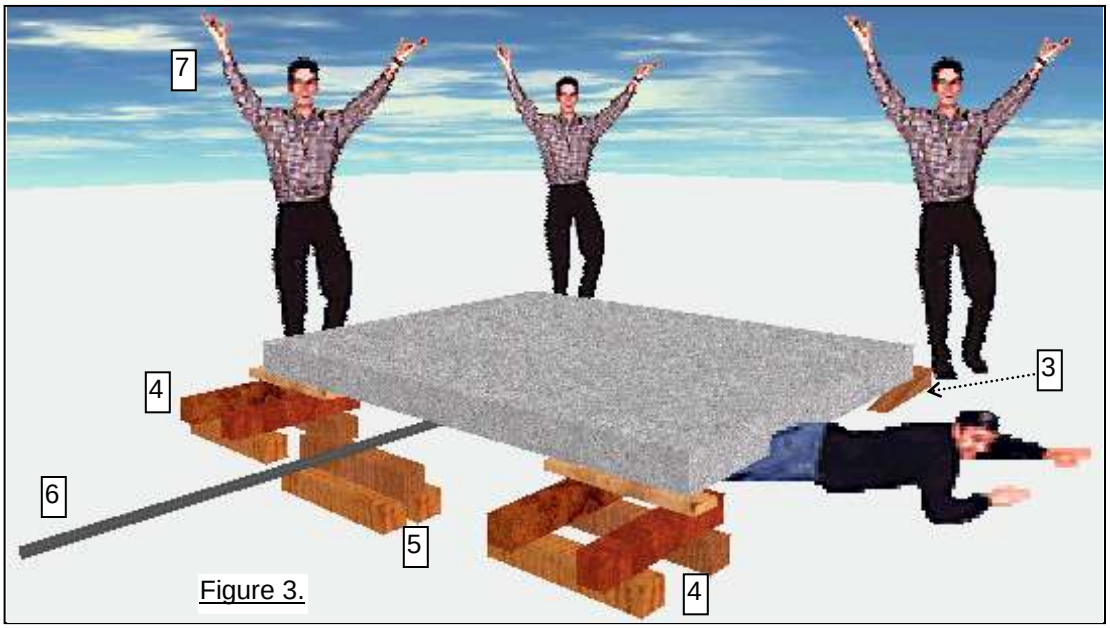


Figure 3.

S&R Standard Tasks.

SIZE-UP

Structural Stability?
Interior Scan.
ha**Z**ards.
Entry Points.
Utilities.
Post Building-S&R Marker.

SEARCH

Shout out the Mobile Minor-injured.
Entry. Find or Force. Mark & Clear.
Alert to hazards and victims.
Right-to-Rescue, Left-to-Leave systematic search.
Check & Chock doors.
Halt on Heavy damage.

When a victim is found, give them **SPACE**.

Size-up victim.
Permission to help?
Alive? Check **A**BC if not response.
Check **C**-spine, **C**ritical bleeding, **C**racked bones?
Emergency care. Stop bleeding. Maintain Airway.

RESCUE

Rehearse **E**xtraction.
Stabilize any fractures.
Collect Pt's essentials.
Upload Patient.
Extract.
Report & **R**epeat. (if more victims)
Release the Trapped.

If no Medical Team:

RPMS Triage.

Package & Transport “Immediates”.

Evaluate & Treat “Delayeds” & “Minors”.

Package & Transport “Delayeds”.

If no Medical Team:

RPMS Triage.

Package & Transport
"Immediates".

Evaluate & Treat
"Delayeds" & "Mino

Package & Transport
"Delayeds".

(Medical Team/S&R)

Prioritize the Injured.

First Red condition determines status.

Respiration Rate		**P**erfusion/**P**ulse		**M**ental Status. Cognizant?	**S**tand up & walk on owe?	Urgency Status
Adult	Child	Capillary Refill	Radial Pulse			
< 10, > 30	**< 15, > 45**	**> 2 Sec's**	**No**	**No**		**Immediate ***
>10, < 30	>15, <45	< 2 Sec's	Yes	Yes	**No**	**Delayed**

* Treat for Shock - feet above chest (if no spinal injury or head swelling), keep warm.

If no Medical Team:

RPMS Triage.

Package & Transport "Immediates".

Evaluate & Treat "Delayeds" & "Minors".

Package & Transport "Delayeds".

Medical Team/S&R prepares transport device (our old heavy backboards) with vacuum splint mattress or blankets.

S&R Team assists with moving patient to transport device (our old heavy backboards)

Transport Teams (volunteers with vans, SUV's or trucks) carry patients to hospital, if open, or to C.P. Medical Area for care and observation until hospital opens.

If no Medical Team:

RPMS Triage.

Package & Transport
"Immediates".

Evaluate & Treat
"Delayeds" & "Minors".

Package & Transport
"Delayeds".

(Medical Team/S&R.)

Head-To-Toe Injury Evaluation in RPMs-Triaged order.

First Aid Treatment. Priorities:

1. Airway & Breathing (Left Lateral)
2. Rapid Bleeding (Direct pressure, Elevation & Pressure Point, Hemostatic Agent, Pressure Bandage.
3. Shock (Feet up)
4. Head trauma (BackBoard head up)
5. Spine (BackBoard level)
6. Burns and Wounds
7. Fractured limbs (Pad & Splint)

RESCUE

RPMS Triage.

Package & Transport
“Immediates”.

Evaluate & Treat
“Delayeds” & “Minors”.

Package & Transport
“Delayeds”.

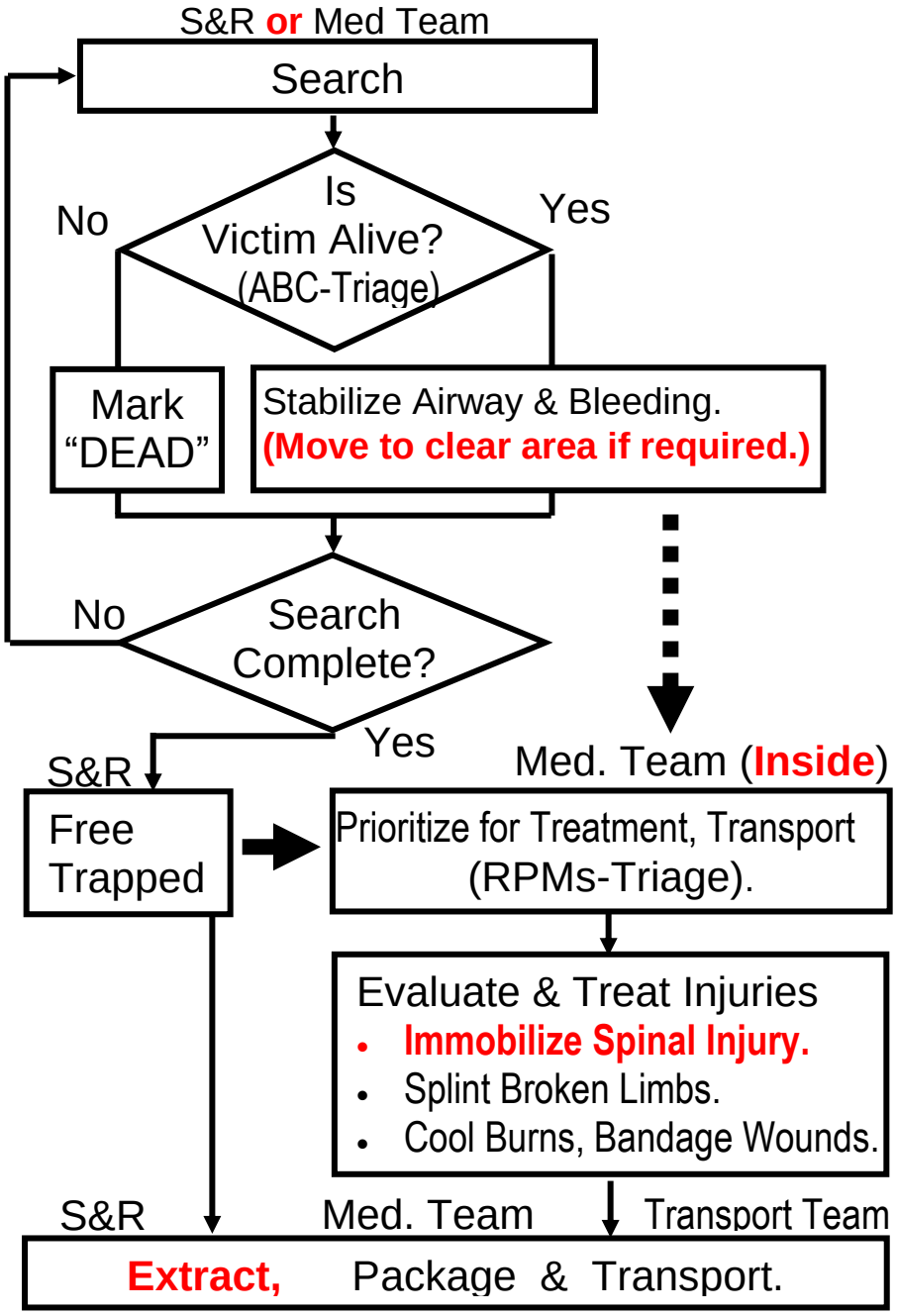
(Same as for “I”s.)

Standard Tasks by type Building Damage

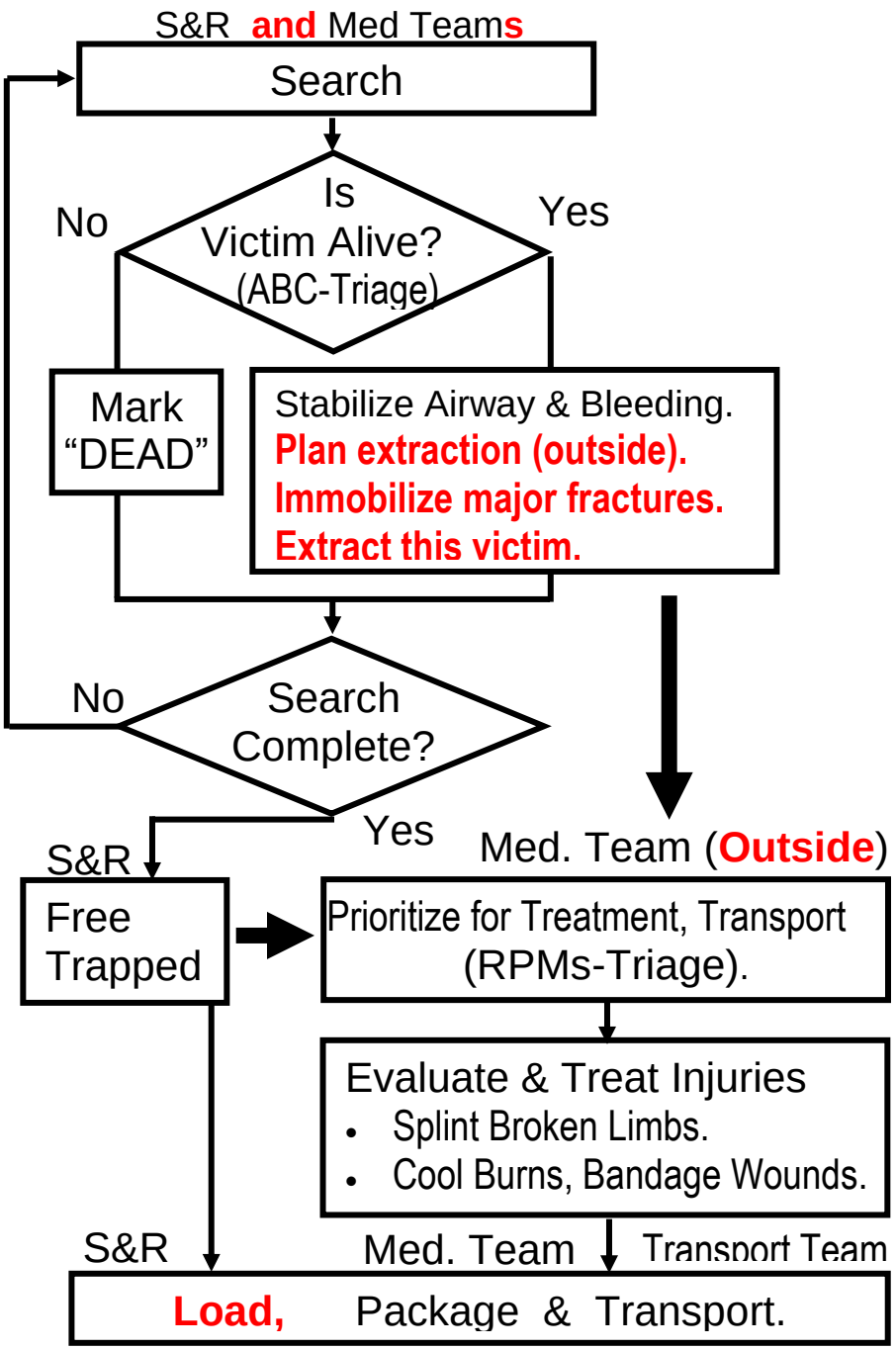
	Lightly Damaged	Moderately Damaged	Heavily Damaged
Size-Up Includes Structure Triage	Each building, room, & victim	Each building, room, & victim	Outside of the **Collapse-Danger Zone**
Shut off risky Utilities. In Lightly Damaged, it depends on conditions. If you don't know how to tell, shut all off.	**If Fire, shutoff Gas & Electric. If Gas, shutoff Electric & Gas. If Water, shutoff Electric & Water.**	**Shut off All before entry.**	Shut off All if safe to reach.
Evacuate Mobile Minors	Evacuate the "un-helpful"	Evacuate All Mobile.	Call out any inside Collapse-Danger Zone.
Find & Stabilize the Living.	ABC-Triage. Maintain Airway. Control bleeding.	ABC-Triage. Maintain Airway. Control bleeding.	ABC-Triage any found in debris field outside the **Collapse-Danger Zone.**
Plan & Prep for extraction or movement.	(Rapid extraction not required. Therefore fracture check done during Head-to-Toe.)	Rapid Assessment. Plan extraction outside. Immobilize major fractures. (Splint outside).	Rapid Assessment. Immobilize & move to a safe area. (Splint in safe area.)
Extract the Non-mobile.	(Not done at this point.)	Extract each living victim in order found.	Extricate each living victim in order found.
Free the Trapped.	While Med. Team treats injured or after "Immediates" transported if no Med. Team	After all others out & after an aftershock.	From debris outside Collapse-Danger Zone.
Prioritize to Treat &/ Transport.	RPMs-Triage Inside.(Med or S&R)	RPMs-Triage Outside. (Med. Team)	RPMs-Triage in a Safe Area
Evaluate and Treat Injuries	Inside. (Med or S&R)	Outside (Med. Team)	In a Safe Area
Package for Transport.	Inside (Med or S&R)	Outside (Med. Team)	In a Safe Area
Transport Patient.	To Hospital, C.P. or SavePlace Care.	To Hospital, C.P. or SavePlace Care.	To Hospital, C.P. or SavePlace Care.

S&R vs. Med. Team Standard Tasks.

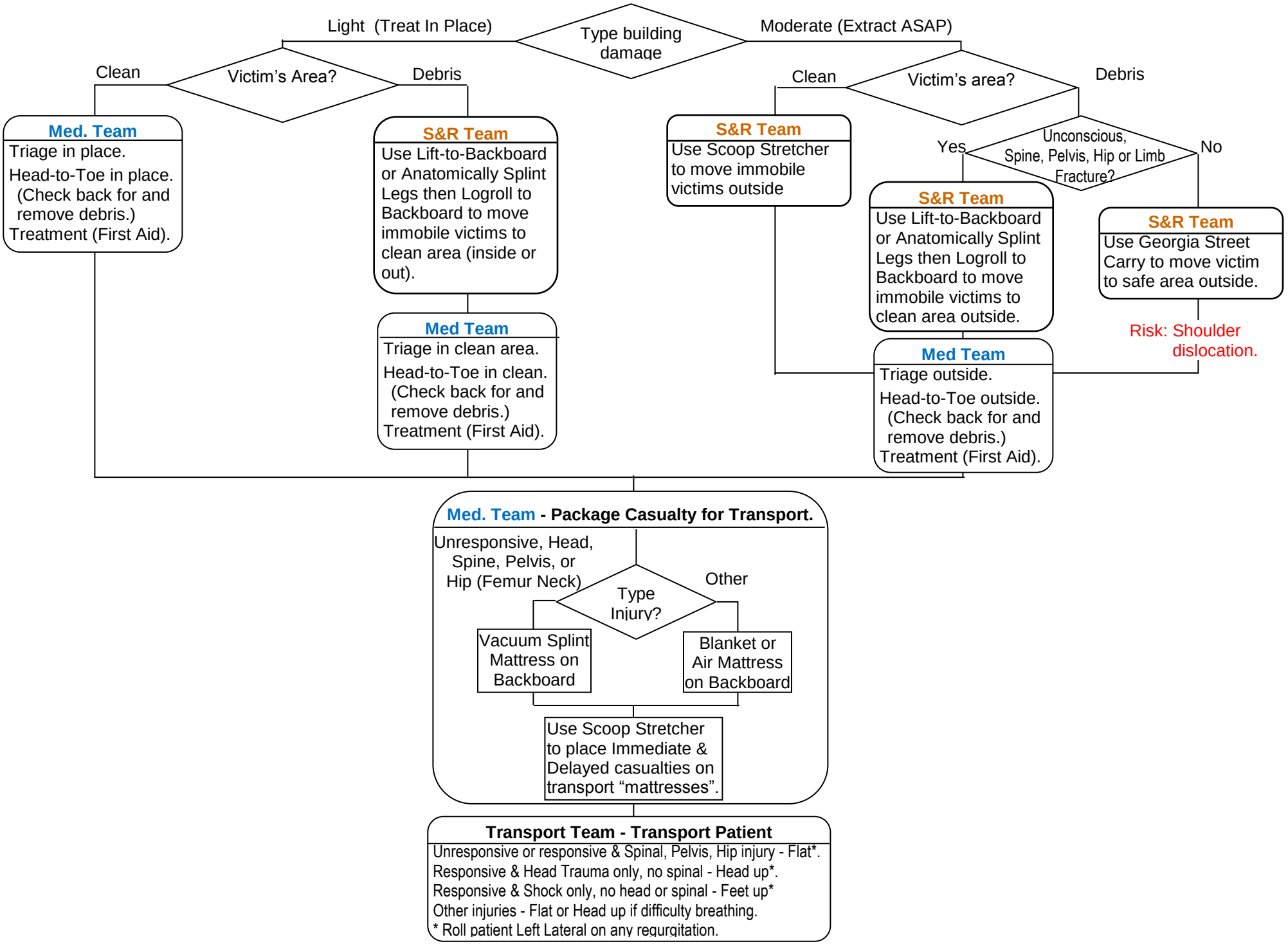
Lightly Damage Building (Treat in Place)



Moderately Damaged Building (Extract ASAP)



Casualty Extraction, Packaging and Transport Details



Standard Tasks and Variations

The table below provides an overview of the standard Response Model upon which the Tasks in this GuideBook are based. (See **bold** headings on left.) Some Tasks are applicable only to the 4-Minute Life Saving Window. The methods and equipment used to accomplish some Tasks vary depending on whether you are performing them by yourself during your Initial Response at your home or business, or at a Mass Casualty Incident, or as a member of an Emergency Response Team during your Follow-on Response. In some Tasks the methods and equipment vary based on the type injuries sustained by the people you are rescuing and the structure they are in. These variations are summarized below.

TASKS	**Initial Individual Response at:**						**Team Response to:**		
During 4-min Life Saving Window.	**Your Home**			**Mass Casualty Inc**			**Community or Workplace**		
Verbal Triage. Use verbal commands to sort non or minor injured from the injured and to get the non-injured to help you.	"If you can walk, come to me."			"If can walk, stand."= M "If can't walk, wave."= D Incognizant Incapable = I					
Basic Life Saving of those:	By you.			M's Care for I's					
- Burning. Extinguish.	X			X					
- Buried. Uncover.	X			X					
- Bleeding. Stop via Direct Pressure & Elevate, Press Pt., Tourniquet.	X			X					
- Not Breathing. Check ABCs. If not breathing, ...	CPR			Open airway.					
Evacuate. If Heavy Smoke, Gas or HazMat, carry immobile out via:	Blanket drag. Fireman's Crawl.			Multi-person Human carry.					
After 4-Minute Life Saving Window									
Size-Up Structure Damage. Type Damage Found?	**Light**	**Mod.**	**Heavy**	**Light**	**Mod.**	**Heavy**	**Light**	**Mod.**	**Heavy**
Turn Off Utilities....	if gas/fire	X	X	-	-	-	if gas or fire	before entry.	if accessible
If Fire, attempt to	suppress.		-	-	-	-	suppress or contain, as possible.		
Call for the Mobile (the "Walking Wounded" **M**inor's) to ...	(Done earlier)			(Done earlier)			help you.	exit.	exit.
Find the Living:	Inside.	Inside.	Inside.	In MCI's open space.			Inside.	Inside.	ISafe zone
- Size-up each Room before entering.	X	X	X	(n/a)			X	X	n/a
- Callout for the Trapped. Find. Free easiest first.	X	X	X	X	X	-	X	X	X
- Hunt for the Buried Missing. Uncover and free.	X	X	X	X	X	-	X	X	X
- Size-up each Victim before approaching.	X	X	X	X	X	-	X	X	X
ABC Triage Check ABC's to find the living. If pulse but not breathing...	Start Rescue Breathing.			Open Airway/Mark "DEAD".			Open Airway, Recheck. Tag "DEAD".		
Stabilize Casualties.									
- Stop severe bleeding.	(Stopped earlier)			(Stopped earlier)			Use temp. tourniquet till extracted.		
- Immobilize head, neck and torso if spinal injury suspected.	Wait for FD or CERT	Tape to board.		Wait for FD	Casualty holds.		C-collar	Scoop St Straps	C-collar Body Splt	C-collar
- Immobilize broken limbs to prevent further injury.		Tie to body.			Casualty holds.		Splint			Splint
Extract Casualties. Methods vary by injury and equipment available.									
- Broken arm or shoulder:	Location is safe, keep in place.	Walk		Wait for Fire Dept.	Walk		Walk		
- Broken leg or hip:		Arm / Blanket Drag			3-person carry		2p Scoop Stretcher / 6p-Lift to Litter or ↓		
- Head, neck, C-Spinal injury, or unconscious:		Pope's Crawl			3-person carry		2p Scoop Stretcher / 4p L.R. to backboard		
- Other non-mobile casualties:		Blanket Drag			2-person carry.		2p Scoop Stretcher / 2p carry		
RPMs Triage. Sort for injury evaluation, treatment and transport).									
Injury Evaluation and Treatment. Where done?	Inside	Outside	Outside	Inside	Outside	Outside	Inside	Outside	Outside
- Stop any continuing bleeding. Flush & cover wounds.	1st Aid Kit			clothing / 1st Aid Kit			BloodSTOP, QuikClot, pressure bandage		
- Cool and cover burns.	Cool water. Aloe when cool.			Cool water (not ice)			Cool water, WaterJel Burn Dressing		
- Ice swelling from fracture, dislocation, Closed Head Trauma	Ice			Ice, Cold Compress			Cold compress		
- Splint fractured or dislocated limbs.	Pillow/cardboard & tape			body splint w clothing			Cardboard, SAM or vacuum splint.		
Package Casualties for Transport. Method depends on type injury.									
- Broken or dislocated shoulder or arm:	Private vehicle			Fire Department			Private vehicle		
- Spinal injury:	Fire Department / CERT			Fire Department			Padded backboard / Vac. splint mattress on a backboard in a truck or van.		
- Other non-mobile:	Fire Department / CERT			Fire Department			Non-rigid fabric stretcher in truck/van		
Transport Immediates, then Delayeds (if FD ETA > 30 min.) **to:**									
a. Medical Facility, if open and reachable.	Contact 911 or CERT for info on open Medical Facilities. Transport those you can carry in private vehicle.			Wait for Fire Dept.			Contact 911 or OEC via Ham for info on open Medical Facilities.		
b. C.P Treatment Area till Med Fac. opens, FD arrives/Airlifts. - Treat Immediates for Shock. Monitor airway, stomach discharge. - Clean & bandage wounds. Hydrate burn victims. Keep warm & dry. - Ice swelling from sprains, strains, burses.									
c. Friend/neighbor's home, if bad weather, till hospital opens.							Provide monitoring instructions.		
Leave spinal and hip-injured patients at hospital on: Leave others on:	(Family, won't leave.)			n/a			Full-body Vacuum splint mattress. Blanket Padding or air mattress.		

Legend: **Red** = Caution required. T.L. = Torso Lift so backboard can be slid under patient

Next Step

1. Review **CERT Field GuideBook**.

   - Preface
   - In Phase 1. Initial Response
     - Task 1. Initial Response at Your Home or Business.
     - Task 1.b Initial Response at a Mass Casualty Incident.
   - In Phase 2, Section 2. Incident Management.
     - Task F. Manage Heavily Damaged Building.
     - Task G. Manage Moderately Damaged Building.
     - Task H. Manage Lightly Damaged Building.
   - In Phase 2. Section 3. Incident Response Team Procedures.
     - Task b. Size-Up
     - Task d. Fire Suppression
     - Task e. Search and Rescue.
     - Task f. Cribbing.
     - Task i. Patient Packaging and Transport.