

Scene Rehabilitation: General (Optional)



Injury/ Illness /Complaint should be treated using appropriate treatment protocol beyond need for oral or IV hydration.

Initial Process

- 1. Personnel logged into General Rehabilitation Section
- VS Assessed/Recorded (If HR > 110 then obtain Temp)
 Carbon Monoxide monitoring if indicated
- 3. Personnel assessed for signs/ symptoms

YES

4. Remove PPE, Body Armor, Haz-Mat Suits, Turnout Gear, Other equipment as indicated

Heat

or Cold stress

NO

Reassess responder after 20 Minutes in General Rehabilitation Section

Temp

≥ 100.6

NO

Significant Injury
Cardiac Complaint: Signs/ Symptoms
Respiratory Complaint: Serious Signs/ Symptoms
Respiratory Rate < 8 or > 40
Systolic Blood Pressure ≤ 80

| NO |
| NO |
| Symptoms |
| Cardiac Complaint: Signs/ Symptoms |
| Cardiac Complaint: Sign

YES▶

HEAT STRESS

Active Cooling Measures

Forearm immersion, cool shirts, cool mist fans etc. Rest 10 – 20 Minutes

Rehydration Techniques

12 – 32 oz Oral Fluid over 20 minutes Oral Rehydration may occur along with Active Cooling Measures Firefighters should consume 8 ounces of fluid between SCBA change-out

COLD STRESS

Active Warming Measures

Dry responder, place in warm area Hot packs to axilla and / or groin Rest 10 – 20 minutes

Rehydration Techniques

12 – 32 oz Oral Fluid over 20 minutes Oral Rehydration may occur along with Active Warming Measures Firefighters should consume 8 ounces of fluid between SCBA change-out

-YES-▶

VITAL SIGN CAVEATS

Blood Pressure:

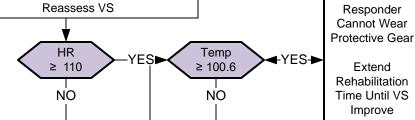
Prone to inaccuracy on scenes. Must be interpreted in context.

Firefighters have elevated blood pressure due to physical exertion and is not typically pathologic.

Firefighters with Systolic BP ≥ 160 or Diastolic BP ≥ 100 may need extended rehabilitation. However this does not necessarily prevent them from returning to duty.

Temperature:

Firefighters may have increased temperature during rehabilitation.



HR

≥ 110

NO

Extend
Rehabilitation
Time Until VS
Improve

Discharge Responder from General Rehabilitation Section

Reports for Reassignment



Scene Rehabilitation: General (Optional)



Criteria for Establishing Rehabilitation Section:

- Any incident or activity 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 for rehabilitation operations.
- Fire, EMS, First Responders, and Law Enforcement should consider rehabilitation during initial stages of response.
- Environment conditions indicating the need to establish rehabilitation are Heat Stress Index > 90 degrees/ Wind-Chill Index < 10 degrees but this should not be the sole indicators.

Site Characteristics of a Rehabilitation Section (In addition to information in Pearls):

- · Locate where physical and mental rest is allowed, as well as protection from environmental conditions.
- Ensure location allows prompt reentry into operations upon recuperation with entry and exits clearly identified.

Criteria for Rehabilitation of Responder (In addition to information in Pearls:

Objective evaluation or self assessment of responders fatigue level shall also determine mandatory rehabilitation.

Hydration:

- Maintenance of water and electrolytes are critical in the prevention of heat injury.
- Water must be replaced during exertion and at incidents.
- During heat stress the responder should consume at least one (1) quart or Liter of water each hour.
- Re-hydration solution optimally should be a 50:50 mixture of water and commercially prepared beverage at 40 degrees.
- Avoid carbonated or caffeinated beverages.
- · Re-hydration is important even during cold stress conditions especially where protective equipment is worn.

Nourishment:

- Typically required where incidents extend more than three (3) hours.
- Soup, broth, or stew is recommended as this is digested easier than sandwiches/ fast food products.
- Fruits such as apples, oranges and bananas are also recommended.
 Fatty/ salty foods should be avoided.

Recovery:

- · Responders should maintain high level of re-hydration during recovery of at least 10 minutes or longer as needed.
- Do not move responder from a hot environment to a cold environment such as air conditioning.
- Air conditioning is acceptable after period of cool down at ambient temperature.

Pearls

- This protocol is optional and given only as an example. Agencies may and are encouraged to develop their own.
- Rehabilitation officer has full authority in deciding when responders may return to duty and may adjust rest/ rehabilitation time frames depending on existing conditions.
- Rehabilitation goals:

Relief from climatic conditions.

Rest, recovery, and hydration prior to incident, during, and following incident.

Active and/ or passive cooling or warming, as needed, for incident type and climate conditions.

- May be utilized with adult responders on fire, law enforcement, rescue, EMS and training scenes.
- Responders taking anti-histamines, blood pressure medication, diuretics or stimulants are at increased risk for cold and heat stress.
- General indications for rehabilitation:

20-minute rehabilitation following use of a second 30-minute SCBA, 45-minute SCBA or single 60-minute SCBA cylinder. 20-minute rehabilitation following 40 minutes of intense work without SCBA.

• General work-rest cycles:

10-minute self-rehabilitation following use of one 30-minute SCBA cylinder or performing 20 minutes of intense work without SCBA.

Serious signs / symptoms:

Chest pain, dizziness, dyspnea, weakness, nausea, or headache.

Symptoms of heat stress (cramps) or cold stress.

Changes in gait, speech, or behavior.

Altered Mental Status.

Abnormal Vital Signs per agency SOP/ SOG or Policy/ Procedure(s).

Rehabilitation Section:

Integral function within the Incident Management System.

Establish section such that it provides shelter/ shade, privacy, and freedom from smoke or other hazards

Large enough to accommodate expected number of personnel.

Separate area to remove PPE.

Accessible to EMS transport units and water supply.

Away from media agencies and spectators/ bystanders.