

SECTION IV

The Civilian Casualty Form (NFIRS-2)

The casualty form NFIRS-2 is used to report any civilian injuries or deaths associated with incidents responded to by the fire department. Some of the same entries appear on both the Casualty and the Incident Forms so that specific incident and casualty information can be linked together and the detailed information about both can be provided. The elements that identify the incident are described here, in the same way they were in the Incident Form Section, for convenience.

In addition to Line A, which contains the information identifying the incident, the civilian casualty form contains three identical sections relating to individual casualties. Each section consists of lines GA through GF, and is used for one casualty. The signatures on line T at the bottom, of the form serve the whole form, whether there are 1, 2 or 3 casualties reported.

Again, as on the incident form, a civilian casualty is a person who dies or is physically injured as the result of an incident. To be recorded, the injury must be severe enough to require treatment by a practitioner of medicine within one year after the incident, whether or not treatment was received, or the injury must result in at least one day of restricted activity immediately following the incident. A death is recorded if the victim dies within one year after an incident as a result of injuries sustained. If a casualty is initially recorded as an injury, and the victim subsequently dies, a change to the casualty form for that incident must be submitted. A change to "severity" on the casualty form will automatically adjust the casualty totals entered on the incident form.

The number of sections on the civilian casualty form completed must be the same as the number of civilian casualties reported on the incident form.

NOTE: This form is for civilian and non-fire service emergency personnel only. Do not use this form for fire service casualties.

CIVILIAN CASUALTY REPORT

FILL IN THIS REPORT
IN YOUR OWN WORDS

FIRE DEPARTMENT

A	FDID	INCIDENT NO.	EXP. NO.	MO	DAY	YEAR	DAY OF WEEK	ALARM TIME	NFIRS - 2
---	------	--------------	----------	----	-----	------	-------------	------------	-----------

								CASUALTY NUMBER	<input type="checkbox"/> DELETE <input type="checkbox"/> CHANGE		
GA	CASUALTY NAME (LAST, FIRST, MI)								DOB MO. YR.	AGE	TIME OF INJURY
GB	HOME ADDRESS								TELEPHONE		
GC	SEX 1 <input type="checkbox"/> MALE 2 <input type="checkbox"/> FEMALE	CASUALTY TYPE 1 <input type="checkbox"/> FIRE CASUALTY 2 <input type="checkbox"/> ACTION CASUALTY 3 <input type="checkbox"/> EMS CASUALTY			SEVERITY 1 <input type="checkbox"/> INJURY 2 <input type="checkbox"/> DEATH	AFFILIATION 2 <input type="checkbox"/> OTHER EMERGENCY PERSONNEL 3 <input type="checkbox"/> CIVILIAN					
GD	FAMILIARITY WITH STRUCTURE		LOCATION AT IGNITION			CONDITION BEFORE INJURY					
GE	CONDITION PREVENTING ESCAPE		ACTIVITY AT TIME OF INJURY			CAUSE OF INJURY					
GF	NATURE OF INJURY		PART OF BODY INJURED			DISPOSITION					
<input type="checkbox"/> SEE REMARKS ON BACK <input type="checkbox"/> SEE ADDITIONAL REPORT											

								CASUALTY NUMBER	<input type="checkbox"/> DELETE <input type="checkbox"/> CHANGE		
GA	CASUALTY NAME (LAST, FIRST, MI)								DOB MO. YR.	AGE	TIME OF INJURY
GB	HOME ADDRESS								TELEPHONE		
GC	SEX 1 <input type="checkbox"/> MALE 2 <input type="checkbox"/> FEMALE	CASUALTY TYPE 1 <input type="checkbox"/> FIRE CASUALTY 2 <input type="checkbox"/> ACTION CASUALTY 3 <input type="checkbox"/> EMS CASUALTY			SEVERITY 1 <input type="checkbox"/> INJURY 2 <input type="checkbox"/> DEATH	AFFILIATION 2 <input type="checkbox"/> OTHER EMERGENCY PERSONNEL 3 <input type="checkbox"/> CIVILIAN					
GD	FAMILIARITY WITH STRUCTURE		LOCATION AT IGNITION			CONDITION BEFORE INJURY					
GE	CONDITION PREVENTING ESCAPE		ACTIVITY AT TIME OF INJURY			CAUSE OF INJURY					
GF	NATURE OF INJURY		PART OF BODY INJURED			DISPOSITION					
<input type="checkbox"/> SEE REMARKS ON BACK <input type="checkbox"/> SEE ADDITIONAL REPORT											

								CASUALTY NUMBER	<input type="checkbox"/> DELETE <input type="checkbox"/> CHANGE		
GA	CASUALTY NAME (LAST, FIRST, MI)								DOB MO. YR.	AGE	TIME OF INJURY
GB	HOME ADDRESS								TELEPHONE		
GC	SEX 1 <input type="checkbox"/> MALE 2 <input type="checkbox"/> FEMALE	CASUALTY TYPE 1 <input type="checkbox"/> FIRE CASUALTY 2 <input type="checkbox"/> ACTION CASUALTY 3 <input type="checkbox"/> EMS CASUALTY			SEVERITY 1 <input type="checkbox"/> INJURY 2 <input type="checkbox"/> DEATH	AFFILIATION 2 <input type="checkbox"/> OTHER EMERGENCY PERSONNEL 3 <input type="checkbox"/> CIVILIAN					
GD	FAMILIARITY WITH STRUCTURE		LOCATION AT IGNITION			CONDITION BEFORE INJURY					
GE	CONDITION PREVENTING ESCAPE		ACTIVITY AT TIME OF INJURY			CAUSE OF INJURY					
GF	NATURE OF INJURY		PART OF BODY INJURED			DISPOSITION					
<input type="checkbox"/> SEE REMARKS ON BACK <input type="checkbox"/> SEE ADDITIONAL REPORT											

U	OFFICER IN CHARGE (NAME, POSITION, ASSIGNMENT)								DATE
GG	MEMBER MAKING REPORT (IF DIFFERENT FROM ABOVE)								DATE

The Civilian Casualty Form (NFIRS-2)

FILL IN THIS REPORT
IN YOUR OWN WORDS

FIRE DEPARTMENT

A

FDID	INCIDENT NO.	EXP. NO.	MO	DAY	YEAR	DAY OF WEEK	ALARM TIME

With minor exceptions, the guidance and directions for completing line A of the casualty and incident forms are the same. The name of the fire department is entered on the line at the top of the form. Each individual Casualty Report must be identified by the following elements from line A of the Incident Report: fire department identification, incident number and exposure number. The remaining entries on line A of the casualty form must be identical with the corresponding entries on the incident form. If injuries occur in an exposure fire, the casualty report should have the same entries as those from line A of the exposure fire incident report,

Fire Department Identification (FDID)

Entry

Enter the State-assigned fire department identification number. This is the same FDID number found on the incident form (NFIRS-1).

Incident Number (Incident No.)

Entry

Enter the number assigned to the incident. This will be the same incident number found on the incident form.

Exposure Number (Exp. No.)

Entry

Enter the exposure number assigned to the property on which the casualty occurred. This will be the same exposure number used on the corresponding incident form.

Calendar Date: (MO., Day, Year)

Entry

For each incident, enter the same information as found in the corresponding entry on the incident form.

Day of Week

Entry

Enter the same information as found in the corresponding entry on the incident form.

Alarm Time

Entry

Enter the same information as found in the corresponding entry on the incident form.

Casualty Number

Definition

This is a unique number assigned to each casualty occurring at a single incident or resulting from the incident.

Purpose

This unique number permits each casualty to be separately identified on the casualty file. Data and information concerning the casualty can be accessed using this number.

Entry

Enter the casualty identification number assigned to each casualty. The first casualty for each incident is always 001, the second casualty is 002, etc.

Example

GA	CASUALTY NAME (LAST, FIRST, MI)	CASUALTY NUMBER		1 <input type="checkbox"/> DELETE	2 <input type="checkbox"/> CHANGE
		101011	DOB MO. YR.		

Delete/Change

Definition

This block is used to signal the change or deletion of information submitted on a previous casualty report. These changes or deletions should be authorized by the officer who signed the original incident report.

Purpose

The purpose of the delete/change entry is to correct previously reported information.

Entry

1. A new Casualty (ADD).
If the casualty report being completed is a new report, or a casualty not previously reported, leave this box blank and complete the casualty report as instructed in this manual.
2. Updating a Previously Submitted Casualty (CHANGE).
If new or updated information concerning a casualty becomes available on a previously submitted casualty, it is possible to update the original casualty report information by submitting a "Change" casualty report. To submit a change:
 - A) Enter the same FDID, Incident Number, Exposure Number and Casualty Number of the Casualty you want to change.
 - B) Check or "X" the Change box.
 - C) Enter the new or updated information and the applicable code numbers.
 - D) Sign and date the report. Normally a Change report should be signed by the officer in charge of the incident; and
 - E) Forward the report according to your normally established procedures.
3. Cancelling a Previously Submitted Casualty (DELETE).
If a previously submitted Casualty report was found to be erroneously submitted, or if it contains errors in the FDID, Incident Number, Exposure Number or Casualty Number fields, it may be necessary to delete the incorrect Casualty from the computer. To submit a Delete Report:
 - A) Enter the same FDID, Incident Number, Exposure Number and Casualty Number of the report you want to delete:
 - B) Check or "X" the Delete box;

C) Sign and date the report. Normally a delete report should be signed by the officer in charge of the incident; and

D) Forward the report according to your normally established procedures. Some states may have restrictions on who may delete a casualty report. Additional verification may be required before a delete report will be processed by a state.

Example

To change a previous casualty report, when a victim dies two months after the incident, the "Change" box would be marked and the report completed as follows.

FILL IN THIS REPORT IN YOUR OWN WORDS		ROGERS FIRE DEPARTMENT								
A	FDID 07434	INCIDENT NO 000471	EXP. NO. 00	MO 	DAY 	YEAR 	DAY OF WEEK 	ALARM TIME 	NFIRS - 2	
									CASUALTY NUMBER 001	1 <input type="checkbox"/> DELETE 2 <input checked="" type="checkbox"/> CHANGE
GA	CASUALTY NAME (LAST, FIRST, MI)					DOB MO. YR.	AGE	TIME OF INJURY		
GB	HOME ADDRESS					TELEPHONE				
GC	SEX 1 <input type="checkbox"/> MALE 2 <input type="checkbox"/> FEMALE	CASUALTY TYPE 1 <input type="checkbox"/> FIRE CASUALTY 2 <input type="checkbox"/> ACTION CASUALTY 3 <input type="checkbox"/> EMS CASUALTY	SEVERITY 1 <input type="checkbox"/> INJURY 2 <input checked="" type="checkbox"/> DEATH	AFFILIATION 2 <input type="checkbox"/> OTHER EMERGENCY PERSONNEL 3 <input type="checkbox"/> CIVILIAN						
GD	FAMILIARITY WITH STRUCTURE 	LOCATION AT IGNITION 	CONDITION BEFORE INJURY							
GE	CONDITION PREVENTING ESCAPE 	ACTIVITY AT TIME OF INJURY 	CAUSE OF INJURY							
GF	NATURE OF INJURY 	PART OF BODY INJURED 	DISPOSITION DIED 6							
<input type="checkbox"/> SEE REMARKS ON BACK <input type="checkbox"/> SEE ADDITIONAL REPORT										

GA	CASUALTY NAME (LAST, FIRST, MI)	DOB MO.	YR.	AGE	TIME OF INJURY
----	------------------------------------	------------	-----	-----	----------------

Casualty Last Name, First Name, MI

Definition

The last name, first name, and middle initial identify the casualty.

Purpose

The name of the casualty may be required for legal purposes. It may also be useful for notification to employers, for insurance purposes, and for filing disability claims.

Entry

Enter the full name of the person. Names should be clearly printed or typed. Use NMI if no middle initial is available.

Example

GA	CASUALTY NAME (LAST, FIRST, MI)	DOB MO.	YR.	AGE	TIME OF INJURY
	Ford, Lawrence P				

Date of Birth (DOB)

Definition

The month and year of birth for the casualty.

Purpose

This data element may be useful for further identifying the individual, and for verifying the age entry.

Entry

Enter the date of birth showing month and year.

Example

A casualty born in February, 1937.

GA	CASUALTY NAME (LAST, FIRST, MI)	DOB MO.	YR.	AGE	TIME OF INJURY
		02	37		

Age

Definition

The age of the casualty in years.

Purpose

This entry permits an analysis of casualties by age with type, severity, and cause of injury to identify trends and patterns that might be helpful in planning casualty prevention techniques.

Entry

Enter the age of the casualty. Make an approximation if the age cannot be determined. For those casualties less than 1 year one, record a 1. For any casualty over age 99, record 99.

Example

GA	CASUALTY NAME (LAST, FIRST, MI)	DOB MO. YR.	AGE 4 6	TIME OF INJURY
----	------------------------------------	------------------	--------------	----------------

Time of Injury

Definition

The time of day, using the 24 hour clock, when the casualty occurred.

Purpose

This information is sometimes needed for legal or insurance purposes. In addition, it may be used to analyze when injuries occur during the course of a fire and during fire suppression activities.

Entry

Enter as closely as possible the time when the injury occurred using the 24-hour clock, i.e., 0001-2400. This could be before or after the alarm time shown on the Incident Report. If the date is different from the date of the incident, show the date of the injury in the remarks section.

Example

A man burns his hand at 3:15 p.m.

GA	CASUALTY NAME (LAST, FIRST, MI)	DOB MO. YR.	AGE 1 5	TIME OF INJURY 1 5 1 5
----	------------------------------------	------------------	--------------	---------------------------------

An injury occurs at 2:17 a.m.

GA	CASUALTY NAME (LAST, FIRST, MI)	DOB MO. YR.	AGE 0 2	TIME OF INJURY 0 2 1 7
----	------------------------------------	------------------	--------------	---------------------------------

GB	HOME ADDRESS	TELEPHONE
----	--------------	-----------

Home Address

Definition

The casualty's current place of residence. The address includes street address, city, state, and zip code.

Purpose

This data element provides additional identification, a means of contacting the next of kin, or of later contacting the casualty, if necessary. It allows determination of casualties which are transients, that is not residents of the jurisdiction in which they were injured. This is sometimes useful for directing prevention education.

Entry

Enter the casualty's home address, including street address, city, state and zip code.

Examples

GB	HOME ADDRESS 133 NW Pleasant St, Avery Delaware 19701	TELEPHONE
GB	HOME ADDRESS 6432 First Street, London, Ohio 44326	TELEPHONE

Telephone

Definition

The casualty's telephone number.

Purpose

The telephone number may be helpful in notifying the next of kin or contacting the casualty.

Entry

Enter the casualty's home telephone number including the area code if available. If not available enter "n/a."

Example

GB	HOME ADDRESS	TELEPHONE (302) 555-0367
----	--------------	-----------------------------

(This page has been intentionally left blank.)

GC	SEX 1 <input type="checkbox"/> MALE 2 <input type="checkbox"/> FEMALE	CASUALTY TYPE 1 <input type="checkbox"/> FIRE CASUALTY 2 <input type="checkbox"/> ACTION CASUALTY 3 <input type="checkbox"/> EMS CASUALTY	SEVERITY 1 <input type="checkbox"/> INJURY 2 <input type="checkbox"/> DEATH	AFFILIATION 2 <input type="checkbox"/> OTHER EMERGENCY PERSONNEL 3 <input type="checkbox"/> CIVILIAN
----	---	--	---	--

Sex, Casualty Type, Severity, Affiliation

These four characteristics assist in categorizing each casualty. One selection should be made under each column heading.

Sex

Definition

The identification of the casualty as male or female.

Purpose

Knowing the sex and age of the casualties can help target prevention activities such as public education and is useful for identification purposes.

Entry

Check the appropriate box.

Casualty Type

Definition

The three categories of Casualty Type are used to identify the circumstances under which the casualty occurred.

Fire Casualty

A person injured or killed as a direct result of a fire regardless of whether it happened before or after the alarm for the incident. Examples of types of fire casualties include: burns, smoke inhalation, and injuries from a ceiling collapse.

Action Casualty

A person injured or killed after the alarm for the incident is received, but not due to fire products or fire damage. Examples of Action Casualties include: a sprained back raising a ladder, cut hand, overexertion, drowning while attempting a rescue, heart attack, and casualties due to the violence of others.

EMS (Emergency Medical Service) Casualty

A person injured or killed before the alarm for a non-fire incident is received, but for whom the alarm is sounded. Examples of EMS casualties include: civilian drowning, vehicle crash injury, heart attack, chemical or electrical burns, and broken bones. A fire fighter injured in a fire station, and for whom a rescue call is made, would be an EMS casualty.

Purpose

This element identifies the general type of casualty. Analysis of this data assists in identifying the various casualty categories.

Entry

Check the appropriate box.

Severity

Definition

The severity of the casualty stated as either injury or death.

Purpose

This data element provides a basic severity indicator. It can be used as a measure for prevention programs aimed at reducing injuries and deaths.

Entry

Check the appropriate box.

Affiliation

Definition

Indicates whether the casualty involved in the incident was emergency personnel or a civilian.

Affiliation has two categories which are:

- A) "Other Emergency Personnel" includes persons working at the scene from other public or private service organizations such as the police department, utility company, other city agencies, the Red Cross, the Salvation Army and the like;
- B) "Civilian" includes non-emergency personnel such as occupants, passers-by or onlookers.

Purpose

This element identifies the groups suffering casualties. This information along with the data on the cause of the casualty and associated incident can help target programs for reducing casualties, and can be used to measure their success.

Entry

Check the appropriate box.

Examples

A policeman falls and sprains his ankle while helping an occupant leave an apartment building which was involved in a fire.

GC	SEX 1 <input checked="" type="checkbox"/> MALE 2 <input type="checkbox"/> FEMALE	CASUALTY TYPE 1 <input type="checkbox"/> FIRE CASUALTY 2 <input checked="" type="checkbox"/> ACTION CASUALTY 3 <input type="checkbox"/> EMS CASUALTY	SEVERITY 1 <input checked="" type="checkbox"/> INJURY 2 <input type="checkbox"/> DEATH	AFFILIATION 2 <input checked="" type="checkbox"/> OTHER EMERGENCY PERSONNEL 3 <input type="checkbox"/> CIVILIAN
----	--	---	--	---

A two-year-old boy is injured when he falls down the outside steps at his residence and strikes his head on the sidewalk; a rescue unit responds.

GC	SEX 1 <input checked="" type="checkbox"/> MALE 2 <input type="checkbox"/> FEMALE	CASUALTY TYPE 1 <input type="checkbox"/> FIRE CASUALTY 2 <input type="checkbox"/> ACTION CASUALTY 3 <input checked="" type="checkbox"/> EMS CASUALTY	SEVERITY 1 <input checked="" type="checkbox"/> INJURY 2 <input type="checkbox"/> DEATH	AFFILIATION 2 <input type="checkbox"/> OTHER EMERGENCY PERSONNEL 3 <input checked="" type="checkbox"/> CIVILIAN
----	--	---	--	---

A woman burns her arm while trying to escape fire in her apartment.

GC	SEX 1 <input type="checkbox"/> MALE 2 <input checked="" type="checkbox"/> FEMALE	CASUALTY TYPE 1 <input checked="" type="checkbox"/> FIRE CASUALTY 2 <input type="checkbox"/> ACTION CASUALTY 3 <input type="checkbox"/> EMS CASUALTY	SEVERITY 1 <input checked="" type="checkbox"/> INJURY 2 <input type="checkbox"/> DEATH	AFFILIATION 2 <input type="checkbox"/> OTHER EMERGENCY PERSONNEL 3 <input checked="" type="checkbox"/> CIVILIAN
----	--	---	--	---

GD	FAMILIARITY WITH STRUCTURE	LOCATION AT IGNITION	CONDITION BEFORE INJURY
----	----------------------------	----------------------	-------------------------

Familiarity with Structure

Definition

This element identifies how much time the casualty had previously spent within the building or structure where the injury occurred: For example, a person visiting a neighbor's home only on Christmas day for three different years has a familiarity with the structure of three days, and not three years.

Purpose

To determine if familiarity with the structure influences whether a casualty can be avoided.

Entry

Enter the approximate length of time the casualty was acquainted with the inside of the building or structure.

Examples

A family lives in a home for 5 years.

GD	FAMILIARITY WITH STRUCTURE 5 Years	LOCATION AT IGNITION	CONDITION BEFORE INJURY
----	---------------------------------------	----------------------	-------------------------

A customer in a restaurant for the first time.

GD	FAMILIARITY WITH STRUCTURE A Few Hours	LOCATION AT IGNITION	CONDITION BEFORE INJURY
----	---	----------------------	-------------------------

Codes © NFPA 1976

FAMILIARITY WITH STRUCTURE

1. Less than 1 day.
2. 1 to 7 days.
3. 8 to 30 days.
4. 1 to 2 months.
5. 3 to 6 months.
6. 7 to 12 months.
7. Over 1 year.
8. Not a structure.
0. Familiarity with the Structure undetermined or not reported.

Coded Examples

A family lives in a home for 5 years.

GD	FAMILIARITY WITH STRUCTURE 5 Years	LOCATION AT IGNITION 17	CONDITION BEFORE INJURY
----	---------------------------------------	----------------------------	-------------------------

A customer in a restaurant for the first time.

GD	FAMILIARITY WITH STRUCTURE A Few Hours	LOCATION AT IGNITION 11	CONDITION BEFORE INJURY
----	---	----------------------------	-------------------------

Location at Ignition

Definition

This element identifies the location of the casualty in relationship to the area where the fire started.

Purpose

To provide more information on how the injury occurred. This can be helpful in directing public education efforts. For example, for those types of casualties which are directly involved in the ignition of fires, prevention efforts have to be directed at preventing the fires rather than on escape. For casualties not directly involved in ignition, a wider range of prevention strategies are possible.

Entry

Enter the location of the fire casualty when the fire started. If the fire did not occur in a structure, indicate the distance of the person to the point of ignition. If the casualty is not a Fire Casualty, enter "Not a Fire Casualty" and code "8."

Examples

A fire casualty who was on the same floor as the fire origin.

GD	FAMILIARITY WITH STRUCTURE	LOCATION AT IGNITION	CONDITION BEFORE INJURY
		On Same Floor	

A person's clothes were ignited.

GD	FAMILIARITY WITH STRUCTURE	LOCATION AT IGNITION	CONDITION BEFORE INJURY
		Clothing Caught Fire	

Codes © NFPA 1976

LOCATION AT IGNITION

1. Fire casualty intimately involved with ignition.
Included are ignition of clothing on a person and ignition of bedding or furniture on which a person is sitting or lying.
2. Fire casualty in the room or space of fire origin.
Included are vehicle compartments, porches, tents, and playhouses.
3. Fire casualty on same floor as origin of fire.

4. Fire casualty In same building as origin of fire.
5. Fire casualty outside of building of fire origin but on property.
6. Fire casualty off property of fire origin at time of ignition.
8. Not a fire casualty.
9. Location of Casualty at Time of Ignition not classified above.
0. Location of Casualty at Time of Ignition undetermined or not reported.

Coded Examples

A fire casualty who was on the same floor as the fire origin.

GD	FAMILIARITY WITH STRUCTURE	LOCATION AT IGNITION	CONDITION BEFORE INJURY
		On Same Floor	3

A person's clothes were ignited.

GD	FAMILIARITY WITH STRUCTURE	LOCATION AT IGNITION	CONDITION BEFORE INJURY
		Clothing Caught Fire	1

Condition Before Injury

Definition

The physical or mental state of the person shortly before becoming a casualty.

Purpose

One purpose here is to determine the number of people who require special training in what to do in case of a fire. The information is also useful in planning rescue services. For example, the frequency of encountering handicapped persons is important for planning rescue equipment and training. The frequency of smoking and drinking as a cause must be distinguished from smoking alone as a cause in planning prevention education.

Entry

Indicate the person's condition prior to being injured.

Examples

A person was reading a book when the fire started.

GD	FAMILIARITY WITH STRUCTURE	LOCATION AT IGNITION	CONDITION BEFORE INJURY
			Awake & Reading

A handicapped person is resting in a wheelchair.

GD	FAMILIARITY WITH STRUCTURE	LOCATION AT IGNITION	CONDITION BEFORE INJURY
			Resting In Wheelchair

Codes © NFPA 1976

CONDITION BEFORE INJURY

1. Asleep.
2. Bedridden, other physical handicap.
3. Impaired by drugs, alcohol.
4. Under restraint.
5. Too young to act.
6. Too old to act.
7. Mentally handicapped, senile.
8. Awake, unimpaired.
9. Condition Before Injury not classified above.
0. Condition Before Injury undetermined or not reported.

Coded Examples

A person was reading a book when the fire started.

GD	FAMILIARITY WITH STRUCTURE	LOCATION AT IGNITION	CONDITION BEFORE INJURY
			Awake & Reading

A handicapped person is resting in a wheelchair.

GD	FAMILIARITY WITH STRUCTURE	LOCATION AT IGNITION	CONDITION BEFORE INJURY
			Resting In Wheelchair

(This page has been intentionally left blank.)

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
----	-----------------------------	----------------------------	-----------------

Condition Preventing Escape

Definition

The most significant condition preventing the casualties uninjured escape.

Purpose

To provide additional information on how a casualty occurred. This information will be helpful in targeting fire prevention techniques, and checking the adequacy and enforcement of codes. For example, if many casualties resulted from illegally-locked doors in public occupancies, that would indicate a need to check inspection practices.

Entry

Indicate why the person could not escape without injury.

Examples

A person was injured while helping to fight the fire.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
	No Factor		

A locked door prevented escape.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
	Door Locked		

Codes © NFPA 1976

CONDITION PREVENTING ESCAPE

1. No time to escape; explosion or fire progressed too rapidly.
2. Fire between casualty and exit.
3. Locked door.
4. Illegal gates, locks.
5. Clothing on casualty burning.
6. Moved too slowly. Included are failures to follow correct (available) escape procedures,
7. Victim Incapacitated prior to ignition.
8. No conditions prevented escape or not a factor.
9. Condition Preventing Escape not classified above.
0. Condition Preventing Escape undetermined or not reported.

Coded Examples

A person was injured while helping to fight the fire.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
	No Factor	18	

A locked door prevented escape.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
	Door Locked	13	

Activity at Time of Injury

Definition

The action or activity in which the person was engaged at the time of injury.

Purpose

To identify the situations in which people are injured most frequently so that public education can be improved to reduce fire injuries. Data on those situations in which the person is injured while sleeping may help in improving fire detection methods and equipment.

Entry

Record what the person was doing at the time of injury.

Examples

A person was injured while helping to fight a fire.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
		Fighting A Fire	

A person is asleep on the couch when injured.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
		Asleep On Couch	

Codes © NFPA 1976

ACTIVITY AT TIME OF INJURY

1. Escaping.
2. Rescue attempt.
3. Fire control.
4. Response/return.
5. Cleanup, salvage, mop-up.
6. Sleeping.
7. Unable to act.
8. Irrational action.
9. Activity at Time of Injury not classified above.
0. Activity at Time of Injury undetermined or not reported.

Coded Examples

A person was injured while helping to fight a fire.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
		Fighting A Fire	3

A person is asleep on the couch when injured.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
		Asleep On Couch	6

Cause of Injury

Definition

The physical event that caused the injury.

Purpose

This is another dimension in describing the cause of an injury. The analysis of this information may permit an understanding of the conditions causing the injury, and a means of planning suitable preventive techniques.

Entry

Indicate the immediate cause or condition responsible for the injury.

Examples

A person's hand is burned by the fire.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
			Exposed To Flame

A person is struck by falling glass from an explosion.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
			Hit By Falling Glass

Codes © NFPA 1976

CAUSE OF INJURY

1. Caught in, under, between; trapped by.
2. Exposed to fire products. Included are flame, heat, smoke, and gas.
3. Exposed to chemicals, radiation. Excluded are fire products (2).
4. Fell or stepped on, over, into.
5. Overexertion.
6. Rubbed by, contact with.
7. Struck by.
8. Not applicable.
9. Cause of injury not classified above.
0. Cause of Injury undetermined or not reported.

Coded Examples

A person's hand is burned by the fire.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
			Exposed To Flame 2

A person is struck by falling glass from an explosion.

GE	CONDITION PREVENTING ESCAPE	ACTIVITY AT TIME OF INJURY	CAUSE OF INJURY
			Hit By Falling Glass 7

(This page has been intentionally left blank.)

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
----	------------------	----------------------	-------------

Nature of Injury

Definition

The type of injury received by the person. Reference should be made to the most serious injury suffered. Other injuries, if any, can be covered in the Remarks section.

Purpose

This entry can be used to analyze the number of each type of injury. This entry can be correlated with other data collected on the incident and casualty reports to provide useful information in reducing injuries.

Entry

Indicate the nature of the injury received by the casualty.

Examples

A person burns his hand while fighting a fire.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
	Burns		

A person receives second degree burns and suffers smoke inhalation.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
	Burns & Smoke		

A person suffers a heart attack.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
	Chest Pains		

Codes © NFPA 1976

NATURE OF INJURY

1. Burns and asphyxia/smoke.
2. Burns only.
3. Asphyxia/smoke only.
4. Wound, cut, bleeding.
5. Dislocation, fracture.
6. Complaint of pain. Included are heart attacks and strokes.
7. Shock.
8. Strain, Sprain.
9. Nature of Injury or Illness not classified above.
0. Nature of Injury or Illness undetermined or not reported.

Coded Examples

A person burns his hand while fighting a fire.

GF	NATURE OF INJURY Burns	PART OF BODY INJURED 12	DISPOSITION
----	---------------------------	----------------------------	-------------

A person receives second degree burns and suffers smoke inhalation.

GF	NATURE OF INJURY Burns & Smoke	PART OF BODY INJURED 11	DISPOSITION
----	-----------------------------------	----------------------------	-------------

A person suffers a heart attack.

GF	NATURE OF INJURY Chest Pains	PART OF BODY INJURED 16	DISPOSITION
----	---------------------------------	----------------------------	-------------

Part of Body Injured

Definition

The part of the body which sustained the injury.

Purpose

This information, when correlated with other entries on lines GC through GF, will provide data useful in the planning for the emergency treatment of injuries, and injury prevention.

Entry

Record the exact part of the body injured.

Examples

A person burns his hand while fighting a fire.

GF	NATURE OF INJURY	PART OF BODY INJURED Hand	DISPOSITION
----	------------------	------------------------------	-------------

Smoke inhalation.

GF	NATURE OF INJURY	PART OF BODY INJURED Lungs	DISPOSITION
----	------------------	-------------------------------	-------------

Trousers ignited, caused second degree burns to the legs.

GF	NATURE OF INJURY	PART OF BODY INJURED Legs	DISPOSITION
----	------------------	------------------------------	-------------

Codes © NFPA 1976

PART OF BODY INJURED

1. Head, neck.
2. Body, trunk, back.
3. Arm.
4. Leg.
5. Hand.
6. Foot.
7. Internal. Included are respiratory system and heart.
8. Multiple parts.
9. Part of Body Injured not classified above.
0. Part of Body Injured undetermined or not reported.

Coded Examples

A person burns his hand while fighting a fire.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
		Hand	5

Smoke inhalation.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
		Lungs	7

Trousers ignited, caused second degree burns to the legs.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
		Legs	4

Disposition

Definition

A description of what was done for the casualty by providing care or by assisting in obtaining medical care.

Purpose

This information is useful in determining the requirements, both personnel and equipment, for handling casualties. This entry also provides another indication of severity of injury.

Entry

Indicate what primary disposition was made of the casualty. If several actions are taken, select the most important. For example, a badly burned casualty is given preliminary first aid and rushed to the burn center at the hospital. Getting the person to the hospital is the primary disposition.

Examples

A casualty is taken by the fire department to a hospital for treatment.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
			Hospital By FD

Injured person moved to hospital in private car.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
			Hospital By Car

Injured person taken to local doctor's office.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION
			To Local Doctor

Codes © NFPA 1976

DISPOSITION

1. Refused help.
2. Treated at scene and released.
3. Taken to hospital by fire department vehicle.
4. Taken to hospital by nonfire department vehicle.
5. Taken to other than hospital.
6. Died.
9. Disposition of Casualty not classified above.
0. Disposition of Casualty undetermined or not reported.

Coded Examples

A casualty is taken by the fire department to a hospital for treatment.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION	Hospital By FD	3
----	------------------	----------------------	-------------	----------------	---

Injured person moved to hospital in private car.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION	Hospital By Car	4
----	------------------	----------------------	-------------	-----------------	---

Injured person taken to local doctor's office.

GF	NATURE OF INJURY	PART OF BODY INJURED	DISPOSITION	To Local Doctor	5
----	------------------	----------------------	-------------	-----------------	---

SEE REMARKS ON BACK

SEE ADDITIONAL REPORT

Remarks

The remarks box is checked if any remarks have been entered on the' reverse side of the casualty form or on a separate continuation sheet.

The Additional Report box is checked if a supplemental report is submitted concerning a particular casualty.

(This page has been intentionally left blank.)

Officer in Charge (Name, Position, Assignment), Date

Definition

The officer in charge is the senior fire service person concerned with the incident. Position refers to the person's rank or office held. Assignment refers to the person's job at that particular time. The signature of the officer in charge should be entered in this block also. The date used is when the officer in charge signs the casualty form.

Purpose

The signature and the date may make the report a legal document. The name, position, and assignment indicate who is responsible for the information.

Entry

The signature of the officer in charge, the position and assignment, and the date are required.

Example

U	OFFICER IN CHARGE (NAME, POSITION, ASSIGNMENT)	DATE
	Captain John E. Barnett	7/4/83
	MEMBER MAKING REPORT (IF DIFFERENT FROM ABOVE)	DATE

Member Making Report (If Different from Above), Date

Definition

This entry will be completed if the officer in charge is a different person from the one making the report, which is often the case. The member making the report should sign the report and include his position and the date.

Purpose

In the absence of the signature of the officer in charge, the signature of the member completing the report and the date may make the casualty form a legal document.

Entry

In the absence of the signature of the officer in charge, the signature of the member completing the report is required. If the officer in charge completed the report, enter "n/a" in this box.

Example

U	OFFICER IN CHARGE (NAME, POSITION, ASSIGNMENT)	DATE
	MEMBER MAKING REPORT (IF DIFFERENT FROM ABOVE)	DATE
	Louis R. James FF	7/4/83

(This page has been intentionally left blank.)