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Report of the Week

It's one of our own!

5/23/08

Report Number: 08-025

Report Date: 01/15/2008 1629

Demographics

Department type: Combination, Mostly paid

Job or rank: Safety Officer

Department shift: 24 hours on - 48 hours off

Age: 43 - 51

Years of fire service experience: 14 - 16

Region: FEMA Region IV

Service Area: Rural

Event Information

Event type: Non-fire emergency event: auto extrication, technical rescue, emergency medical call, service calls, etc.

Event date and time: 12/27/2007 1751

Hours into the shift:

Event participation: Told to and submitted by safety officer

Do you think this will happen again?

What do you believe caused the event?

- Other

What do you believe is the loss potential?

- Life threatening injury

Event Description

At approximately 1715 hours units were toned out to a respiratory distress call. Medic [number deleted], Engine [number deleted], and Volunteer Stations [numbers deleted], were dispatched. We arrived on scene to find the patient unresponsive with agonal respirations. The cardiac monitor was applied and we found the patient was in V-fib. CPR was initiated and ALS treatment started. Patient was moved onto an LSB [Long Spine Board], moved to Medic [number deleted]'s stretcher and transferred to Medic unit for transport to the ER. After loading of the patient was complete, a [age deleted] driver/operator from Station [number deleted] returned to where the patient had been found and started to clean up the area. He was accompanied by a family member who was on scene with the initial patient. As Medic [number deleted] was leaving the scene, they heard a female voice on the radio calling for help stating, "One of your firefighters has fallen to the ground behind the house and is not moving at this time." An EMT ran to the back of the house and found the driver/operator lying supine on the ground, pulseless and apneic. The EMT called for ALS backup. Medic [number deleted] stopped on the road and traded out personnel with the engine, sending 1 medic and 2 EMT's on Medic [number deleted], and leaving 1 medic and 1 EMT on scene with the down driver/operator. All ACLS interventions were initiated and the driver/operator was defibrillated by engine crew. An IV

was also established by the engine's medic and CPR continued with O2 administered via BVM. The driver/operator was then defibrillated a second time and regained a pulse at this time. Shortly after this Medic [number deleted] arrived on scene, continued care with the engine crew, and transported the driver/operator to the hospital. The driver/operator's pulse rate and B/P improved while in route to the ER. Patient care was turned over to the ER staff upon arrival at the ER. [Specific medical information deleted]. The [age deleted] driver/operator is recovering and ready to get back home to his own surroundings. The brackets [] in this report denote identifying information removed by the reviewer.

Lessons Learned

This incident would have had a different outcome if the ALS engine's well trained medical personnel had not still been on the scene.

Discussion Questions

There can be no more chilling radio transmission than that of a civilian calling out on a department radio for a member down. The crews in **08-025**, by all accounts, reacted with an admirable level of professionalism; but what about you and your crew? Look around at the members sitting at the table as you review this week's report and picture one of them "...pulseless and apneic..." After you have read the full account of **08-025** consider the following:

1. Would your department's current response assignment to a similar incident (the initial respiratory distress call) provide enough members to take care of one of your own if needed?
2. How far away would the next arriving ALS service and/or transport unit have to come from to care for the member down?
3. Would you have considered bringing the ALS unit that was transporting the first patient back to the scene to transport the member down as well?
4. When was your last physical exam?
5. Did the exam follow the requirements outlined in NFPA 1582 Comprehensive Occupational Medical Program for Fire Departments?

Note: The questions posed by the reviewers are designed to generate discussion and thought in the name of promoting firefighter safety. They are not intended to pass judgment on the actions and performance of individuals in the reports.