

Please Note:

The following document, Handout 5-5, is a sample IAP for a train derailment incident. It is unrelated to Handout 5-4, which is an IAP used in Exercise 4 involving unrest in Central City.

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name: C & C Train Derailment	2. Operational Period: Date From: 1/22 Time From: 1200	Date To: 1/22 Time To: 2400															
3. Objective(s): Provide for the safety of the public and a safe work environment for all responders. Identify current and potential hazardous materials releases and potential impacts to the public and environment, including: Human Exposure, Municipal Water Supplies, Air Quality, Flora & Fauna Establish safety mitigations for firefighters and extinguish fires as soon as possible. Prepare and initiate a plan to contain and prevent further release of hazardous materials by 1200 hrs tomorrow. Complete a damage survey within 24 hrs. Establish HAZMAT clean up activities with a target completion time of 72 hrs. Return all public facilities used for the response to at least minimal operational condition within 48 hrs.																	
4. Operational Period Command Emphasis: Conduct all activities following ICS principals and highest level of interagency cooperation. Operations provide assistance to the PIO for media access. Follow local radio protocols to minimize over use of assigned frequencies.																	
General Situational Awareness Fog and low clouds through about 1100 then clearing. Maximum Temperature 58 – 62. Minimum Relative Humidity 60 – 64%. Winds light southwest to 4 MPH turning northwest after about 1600. A high pressure ridge is bringing stable conditions to the area so expect return of fog to the area tonight. Remember, that appropriate PPE MUST be worn at all times. If you do not have PPE, order thru the Logistics Section Chief.																	
5. Site Safety Plan Required? Yes ☒ No ☐ Approved Site Safety Plan(s) Located at: ICP																	
6. Incident Action Plan (the items checked below are included in this Incident Action Plan): <table style="width: 100%;"> <tr> <td>☒ ICS 202</td> <td>☒ ICS 206</td> <td><u>Other Attachments:</u></td> </tr> <tr> <td>☒ ICS 203</td> <td>☐ ICS 207</td> <td>☒ Traffic Plan</td> </tr> <tr> <td>☒ ICS 204</td> <td>☒ ICS 208</td> <td>☐ _____</td> </tr> <tr> <td>☒ ICS 205</td> <td>☒ Map/Chart</td> <td>☐ _____</td> </tr> <tr> <td>☐ ICS 205A</td> <td>☐ Weather Forecast/Tides/Currents</td> <td>☐ _____</td> </tr> </table>			☒ ICS 202	☒ ICS 206	<u>Other Attachments:</u>	☒ ICS 203	☐ ICS 207	☒ Traffic Plan	☒ ICS 204	☒ ICS 208	☐ _____	☒ ICS 205	☒ Map/Chart	☐ _____	☐ ICS 205A	☐ Weather Forecast/Tides/Currents	☐ _____
☒ ICS 202	☒ ICS 206	<u>Other Attachments:</u>															
☒ ICS 203	☐ ICS 207	☒ Traffic Plan															
☒ ICS 204	☒ ICS 208	☐ _____															
☒ ICS 205	☒ Map/Chart	☐ _____															
☐ ICS 205A	☐ Weather Forecast/Tides/Currents	☐ _____															
7. Prepared by: Name: S. Lewotsky Position/Title: Planning Section Chief Signature: <i>S. Lewotsky</i>																	
8. Approved by Incident Commander: Name: J. Harper Signature: <i>J. Harper</i>																	
ICS 202	IAP Page 1	Date/Time: 1/22 1000hrs															

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ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Incident Commander(s) and Command Staff:		7. Operations Section:	
IC/UCs		Chief	
		Deputy	
Deputy		Staging Area	
Safety Officer		Branch	
Public Info. Officer		Branch Director	
Liaison Officer		Deputy	
4. Agency/Organization Representatives:		Division/Group	
Agency/Organization	Name	Division/Group	
		Division/Group	
		Division/Group	
		Division/Group	
		Branch	
		Branch Director	
		Deputy	
5. Planning Section:		Division/Group	
Chief		Division/Group	
Deputy		Division/Group	
Resources Unit		Division/Group	
Situation Unit		Division/Group	
Documentation Unit		Branch	
Demobilization Unit		Branch Director	
Technical Specialists		Deputy	
		Division/Group	
		Division/Group	
		Division/Group	
6. Logistics Section:		Division/Group	
Chief		Division/Group	
Deputy		Air Operations Branch	
Support Branch		Air Ops Branch Dir.	
Director			
Supply Unit			
Facilities Unit		8. Finance/Administration Section:	
Ground Support Unit		Chief	
Service Branch		Deputy	
Director		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Comp/Claims Unit	
Food Unit		Cost Unit	
9. Prepared by: Name: _____ Position/Title: _____ Signature: _____			
ICS 203	IAP Page _____	Date/Time: _____	

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ASSIGNMENT LIST (ICS 204)

1. Incident Name: C & C Train Derailment		2. Operational Period: Date From: 1/22 Date To: 1/22 Time From: 1200 Time To: 2400		3. Branch: Division: Group: Fire/Rescue Staging Area:	
4. Operations Personnel: <u>Name</u> <u>Contact Number(s)</u> Operations Section Chief: George Cason Command Channel 454-555-8383 Branch Director: _____ Division/Group Supervisor: M. Chambers Command & TAC1 454-555-2928					
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information
Resource Identifier	Leader				
S/T 3166 C	J. Acosta	15	TAC 1 ph 454-555-5677	DP 1 1215hrs	
S/T 3167 C	M. Blair	15	TAC 1 ph 454-555-4433	DP 1 1215hrs	
HazMat 16	B. Beadnell	7	TAC 1/3 ph 454-555-5632	DP 1 1215hrs	
Hvy Rescue Crew 12	J. Hanrahan	2	TAC 1 ph 454-555-5637	DP 1 1215hrs	
EMS ALS CC 1	D. Clark	2	TAC 1 ph 454-555-5673	DP 1 1215hrs	
EMS BLS CC 2	E. Smith	2	TAC 1 ph 454-555-5671	DP 1 1215hrs	
Asst SOFR	S. Salls	1	TAC 1 ph 454-555-5655	DP 1 1215hrs	

6. Work Assignments:
 Continue containment and extinguishment of LPG cars and other fires.

 Eliminate any potential ignition sources. Search for injured where safe to do so.

7. Special Instructions:
 Make sure everyone is wearing proper PPE!
 Escape signal will be three (3) blasts on an engine air horn.
 Establish Gross Decon. Monitor Equipment Use.
 Post Lookouts and monitor runoff.

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)
Command / Command/Control	CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)
TAC 1 / Tactical	CC net Channel 2 T/R 154.385 Tactical Fire/Rescue
TAC 2 / Tactical	CC net Channel 3 T/R 160.050 Tactical Law Enforcement
TAC 3 / HazMat Entry	CC net Channel 8 T/R 155.040 Tactical HazMat Entry only

9. Prepared by: Name: F. Sheets Position/Title: RESL Signature:

ICS 204

IAP Page 3

Date/Time: 1/22 1000

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ASSIGNMENT LIST (ICS 204)

1. Incident Name: C & C Train Derailment		2. Operational Period: Date From: 1/22 Date To: 1/22 Time From: 1200 Time To: 2400		3. Branch: Division: Group: Haz Mat Staging Area:											
4. Operations Personnel: <u>Name</u> <u>Contact Number(s)</u> Operations Section Chief: <u>George Cason</u> Command channel ph 454-555-8383 Branch Director: _____ Division/Group Supervisor: <u>M. Duncan</u> Command and Channel 2 tac ph 555-3978															
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information										
Resource Identifier	Leader														
Engine 12	J. Wilkins	3	Channel 2 ph 454-555-8493	DP 1 1215hrs											
Engine 14	M. Strange	3	Channel 2 ph 454-555-8488	DP 1 1215hrs											
HazMat 6	G. Montgomery	7	Channel 2/8 ph 454-555-8466	DP 1 1215hrs											
HazMat 7	K. Keifer	7	Channel 2/8 ph 454-555-8455	DP 1 1215hrs											
HazMat 9	R. Wood	7	Channel 2/8 ph 454-555-8444	DP 1 1215hrs											
Asst SOFR	S. Gage	1	Channel 2 ph 454-555-8498	DP 1 1215hrs											
RR Haz Mat Specialist	M. Marlow	1	Channel 2/8 ph 454-555-8793	DP 1 1215hrs											
F&G Specialist	D. Gelderman	1	Channel 2 ph 454-555-8693	DP 1 1215hrs											
6. Work Assignments: Complete identification of train contents. Coordinate with Fire/Rescue Group. Contain spills around train and down river. Provide decontamination for all personnel.															
7. Special Instructions: Make sure everyone is wearing proper PPE! Escape signal will be three (3) blasts on an engine air horn. Establish Gross Decon. Monitor Equipment Use. Post Lookouts and monitor runoff.															
8. Communications (radio and/or phone contact numbers needed for this assignment): <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 35%; text-align: left;">Name/Function</th> <th style="width: 65%; text-align: left;">Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</th> </tr> <tr> <td>Command / Command/Control</td> <td>CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)</td> </tr> <tr> <td>TAC 1 / Tactical</td> <td>CC net Channel 2 T/R 154.385 Tactical Fire/Rescue</td> </tr> <tr> <td>TAC 2 / Tactical</td> <td>CC net Channel 3 T/R 160.050 Tactical LE</td> </tr> <tr> <td>TAC 3 / HazMat Entry</td> <td>CC net Channel 8 T/R 155.040 Tactical HazMat Entry</td> </tr> </table>						Name/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)	Command / Command/Control	CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)	TAC 1 / Tactical	CC net Channel 2 T/R 154.385 Tactical Fire/Rescue	TAC 2 / Tactical	CC net Channel 3 T/R 160.050 Tactical LE	TAC 3 / HazMat Entry	CC net Channel 8 T/R 155.040 Tactical HazMat Entry
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TAC 3 / HazMat Entry	CC net Channel 8 T/R 155.040 Tactical HazMat Entry														
9. Prepared by: Name: <u>F. Sheets</u> Position/Title: <u>RESL</u> Signature: <u><i>F. Sheets</i></u>															
ICS 204	IAP Page <u>4</u>	Date/Time: <u>1/22 1000</u>													

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ASSIGNMENT LIST (ICS 204)

1. Incident Name: C & C Train Derailment		2. Operational Period: Date From: 1/22 Time From: 1200		Date To: 1/22 Time To: 2400		3. Branch: Division: Group: Law Enforcement Staging Area:										
4. Operations Personnel: <u>Name</u> <u>Contact Number(s)</u> Operations Section Chief: <u>George Cason</u> <u>Command Channel</u> <u>ph 454-555-8383</u> Branch Director: _____ Division/Group Supervisor: <u>B. Adams</u> <u>Command and Tac 3</u> <u>555-1892</u>																
5. Resources Assigned:																
Resource Identifier		Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)		Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information										
L E S/T #11		B. Kelly	10	Tac 3 ph 454-555-3456		DP 2 1215hrs										
L E S/T #12		K. Howell	10	Tac 3 ph 454-555-3455		DP 2 1215hrs										
L E S/T #13		T. Pulcher	10	Tac 3 ph 454-555-3424		DP 2 1215hrs										
L E S/T #14		P. Schreffler	10	Tac 3 ph 454-555-3412		DP 2 1215hrs										
L E S/T #15		D. Olsen	10	Tac 3 ph 454-555-3489		DP 2 1215hrs										
Boat #45		J. Mainwaring	3	Tac 3 ph 454-555-3411		DP 2 1215hrs										
Boat # 46		P. Duprey	3	Tac 3 ph 454-555-3422		DP 2 1215hrs										
Asst SOFR		L. Downan	1	Tac 1/3 ph 454-555-3444		DP 2 1215hrs										
6. Work Assignments: Maintain perimeter, restrict access to authorized personnel. N (17th St), E (Z St), S (29th St), W (L St). Complete any evacuation within the perimeter. Continue river closure																
7. Special Instructions: Make sure all Escape Routes are Identified. Control and maintain safe traffic patters for evacuees. Monitor equipment use.																
8. Communications (radio and/or phone contact numbers needed for this assignment): <table><tr><td><u>Name/Function</u></td><td><u>Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</u></td></tr><tr><td><u>Command / Command/Control</u></td><td><u>CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)</u></td></tr><tr><td><u>TAC 1 / Tactical</u></td><td><u>CC net Channel 2 T/R 154.385 Tactical Fire/Rescue</u></td></tr><tr><td><u>TAC 3 / Tactical</u></td><td><u>CC net Channel 3 T/R 160.050 Tactical Law Enforcement</u></td></tr><tr><td><u>/</u></td><td></td></tr></table>							<u>Name/Function</u>	<u>Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</u>	<u>Command / Command/Control</u>	<u>CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)</u>	<u>TAC 1 / Tactical</u>	<u>CC net Channel 2 T/R 154.385 Tactical Fire/Rescue</u>	<u>TAC 3 / Tactical</u>	<u>CC net Channel 3 T/R 160.050 Tactical Law Enforcement</u>	<u>/</u>	
<u>Name/Function</u>	<u>Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</u>															
<u>Command / Command/Control</u>	<u>CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)</u>															
<u>TAC 1 / Tactical</u>	<u>CC net Channel 2 T/R 154.385 Tactical Fire/Rescue</u>															
<u>TAC 3 / Tactical</u>	<u>CC net Channel 3 T/R 160.050 Tactical Law Enforcement</u>															
<u>/</u>																
9. Prepared by: Name: <u>F. Sheets</u> Position/Title: <u>RESL</u> Signature: <u>F. Sheets</u>																
ICS 204		IAP Page <u>5</u>		Date/Time: <u>1/22 1000</u>												

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ASSIGNMENT LIST (ICS 204)

1. Incident Name: C & C Train Derailment		2. Operational Period: Date From: 1/22 Date To: 1/22 Time From: 1200 Time To: 2400		3. Branch: Division: Group: EMS Staging Area:											
4. Operations Personnel: <u>Name</u> <u>Contact Number(s)</u> Operations Section Chief: <u>George Cason</u> <u>Command Channel 555-8787</u> Branch Director: _____ Division/Group Supervisor: <u>B. Myers</u> <u>Tac 1 555-5432</u>				Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information											
5. Resources Assigned:		# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)												
Resource Identifier	Leader														
ALS S/T #1	R. Steed	4	Tac 1 ph 530-555-2244			DP 1 1215 hrs									
ALS S/T #2	J. Gay	4	Tac 1 ph 530-555-9999			DP 1 1215 hrs									
BLS S/T #5	K. Olson	4	Tac 1 ph 530-555-9944			DP 1 1215 hrs									
BLS S/T #7	C. Costello	4	Tac 1 ph 530-555-9955			DP 1 1215 hrs									
6. Work Assignments: Continue treatment of injured. Support Fire, Haz Mat and Law Enforcement Groups with EMS needs. Coordinate EMS Needs with Red Cross Evacuation Center															
7. Special Instructions: Make sure everyone is wearing proper PPE. Establish Escape Routes and make them known to everyone.															
8. Communications (radio and/or phone contact numbers needed for this assignment): <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Name/Function</th> <th style="text-align: left; border-bottom: 1px solid black;">Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</th> </tr> <tr> <td style="border-bottom: 1px solid black;">Command / Command/Control</td> <td style="border-bottom: 1px solid black;">CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)</td> </tr> <tr> <td style="border-bottom: 1px solid black;">TAC 1 / Tactical</td> <td style="border-bottom: 1px solid black;">CC net Channel 2 T/R 154.385 Tactical Fire/Rescue</td> </tr> <tr> <td style="border-bottom: 1px solid black;">TAC 2 / Tactical</td> <td style="border-bottom: 1px solid black;">CC net Channel 3 T/R 160.050 Tactical LE</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Air /Ground / Air Operations</td> <td style="border-bottom: 1px solid black;">CC net Channel 9 T/R 170.000 All air tactical operations</td> </tr> </table>						Name/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)	Command / Command/Control	CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)	TAC 1 / Tactical	CC net Channel 2 T/R 154.385 Tactical Fire/Rescue	TAC 2 / Tactical	CC net Channel 3 T/R 160.050 Tactical LE	Air /Ground / Air Operations	CC net Channel 9 T/R 170.000 All air tactical operations
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Command / Command/Control	CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)														
TAC 1 / Tactical	CC net Channel 2 T/R 154.385 Tactical Fire/Rescue														
TAC 2 / Tactical	CC net Channel 3 T/R 160.050 Tactical LE														
Air /Ground / Air Operations	CC net Channel 9 T/R 170.000 All air tactical operations														
9. Prepared by: Name: <u>F. Sheets</u> Position/Title: <u>RESL</u> Signature: <u></u>															
ICS 204	IAP Page <u>6</u>	Date/Time: <u>1/22 1000</u>													

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ASSIGNMENT LIST (ICS 204)

1. Incident Name: C & C Train Derailment		2. Operational Period: Date From: 1/22 Date To: 1/22 Time From: 1200 Time To: 2400		3. Branch: Division: Group: Dma Assessmt Staging Area:	
4. Operations Personnel: <u>Name</u> <u>Contact Number(s)</u> Operations Section Chief: George Cason 454-555-8787 Branch Director: _____ Division/Group Supervisor: L. Orozco 454-555-1357					
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information
Resource Identifier	Leader				
DAT #1	R. Bollier	3	ph 454-555-6567	DP 1 1230hrs	
DAT #2	C. Sarubbi	3	ph 454-555-6567	DP 1 1230hrs	
DAT #3	G. Adams	3	ph 454-555-6567	DP 1 1230hrs	
DAT #4	A. Alfonzo	3	ph 454-555-6567	DP 1 1230hrs	

6. Work Assignments:
 Coordinate with all Groups to assess damage throughout the incident area.

 Assess public facilities for use within 48 hours. Assess impacts to threatened and endangered species.

7. Special Instructions:
 Post Lookouts!
 Identify Escape Routes and make them known to everyone.
 Be expected to have problems with "Runoff Control"! Make sure you monitor runoff.

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)
Command / Command/Control	CC net Channel 1 T/R 154.900 Command (IC, OSC, Group Sups and Medical Emergencies)
TAC 1 / Tactical	CC net Channel 2 T/R 154.385 Tactical
TAC 2 / Tactical	CC net Channel 3 T/R 160.050 Tactical
Air /Ground / Air Operations	CC net Channel 9 T/R 170.000 All air tactical operations

9. Prepared by: Name: F. Sheets Position/Title: RESL Signature: 

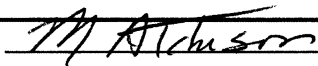
ICS 204

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Date/Time: 1/22 1000

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INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

1. Incident Name: C & C Derailment				2. Date/Time Prepared: Date: 1/22 Time: 1000hrs				3. Operational Period: Date From: 1/22 Date To: 1/22 Time From: 1200 Time To: 2400			
4. Basic Radio Channel Use:											
Zone Grp.	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	TX Tone/NAC	Mode (A, D, or M)	Remarks	
	1	Command	CC net Channel 1	Command/contl	154.900 N		154.900 N		D	OSC, OPBD, Grp Supervisors, and Medical emergencies	
	2	Tactical	CC net Channel 2	Fire/Rescue Tactical	154.385 N		154.385 N		D	Fire and Rescue Tactical Operations	
	3	Tactical	CC net Channel 3	LE Tactical	160.050 N		160.050 N		D	Law Enforcement Tactical Operations	
	8	HazMat	CC net Channel 8	HazMat Tactical	155.040 N		155.040 N		D	HazMat Tactical Entry Only	
	9	Air to Ground	CC net Channel 9	Air Operations	170.000 N		170.000 N		D	All Air Operations if needed	
5. Special Instructions:											
6. Prepared by (Communications Unit Leader): Name: <u>M. Atchison</u> Signature: <u></u>											
ICS 205			IAP Page <u>8</u>			Date/Time: <u>1/22 1100hrs</u>					

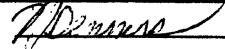
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MEDICAL PLAN (ICS 206)

1. Incident Name: C & C Train Derailment		2. Operational Period: Date From: 1/22 Time From: 1200		Date To: 1/22 Time To: 1200			
3. Medical Aid Stations:							
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?				
Incident Aid Station #1	24th and U St.	Command channel 555-6923	☒ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
4. Transportation (indicate air or ground):							
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service				
Central City EMS	W and 12th Street	374-3944	☒ ALS ☐ BLS				
Med Flight 1	CC Hospital	555-8989	☒ ALS ☐ BLS				
Fisherville Ambulance	F & 7th St. Fisherville	567-555-0963	☐ ALS ☒ BLS				
Bayport Ambulance Svc	Ferry Blvd. & 7 th Ave., Bayport	599-555-7192	☒ ALS ☐ BLS				
5. Hospitals:							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
Central City	D St. Between 31 & 34 St. Lat 39.0589 Lon 120.0936	911	10	20	☒ Yes Level: _____	☒ Yes ☐ No	☒ Yes ☐ No
Faith Hospital	S & 14th Street	911	0	30	☒ Yes Level: _____	☐ Yes ☒ No	☐ Yes ☒ No
Fisherville General	S & 1st St., Fisherville Lat 39.0579 Lon 120.0956	567-555-0963	30	60	☒ Yes Level: _____	☐ Yes ☒ No	☒ Yes ☐ No
					☐ Yes Level: _____	☐ Yes ☐ No	☐ Yes ☐ No
					☐ Yes Level: _____	☐ Yes ☐ No	☐ Yes ☐ No
6. Special Medical Emergency Procedures: The DIVS/Group Supervisor will take charge of a Medical Emergency, notify EMC Dispatch on Command Channel. Dispatch will clear all radio traffic except for the emergency. The closest EMT will respond to the incident for triage and treatment. The DIVS/Group Supervisor will give Dispatch the following information: type of injury, mechanism, type of transport needed, and location. Gross Decon will be preformed on all patients ☐ Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.							
7. Prepared by (Medical Unit Leader): Name: <u>K. Lujan</u> Signature: <u>K. Lujan</u>							
8. Approved by (Safety Officer): Name: <u>N. Dennis</u> Signature: <u>N. Dennis</u>							
ICS 206		IAP Page <u>9</u>		Date/Time: <u>1/22 1000</u>			

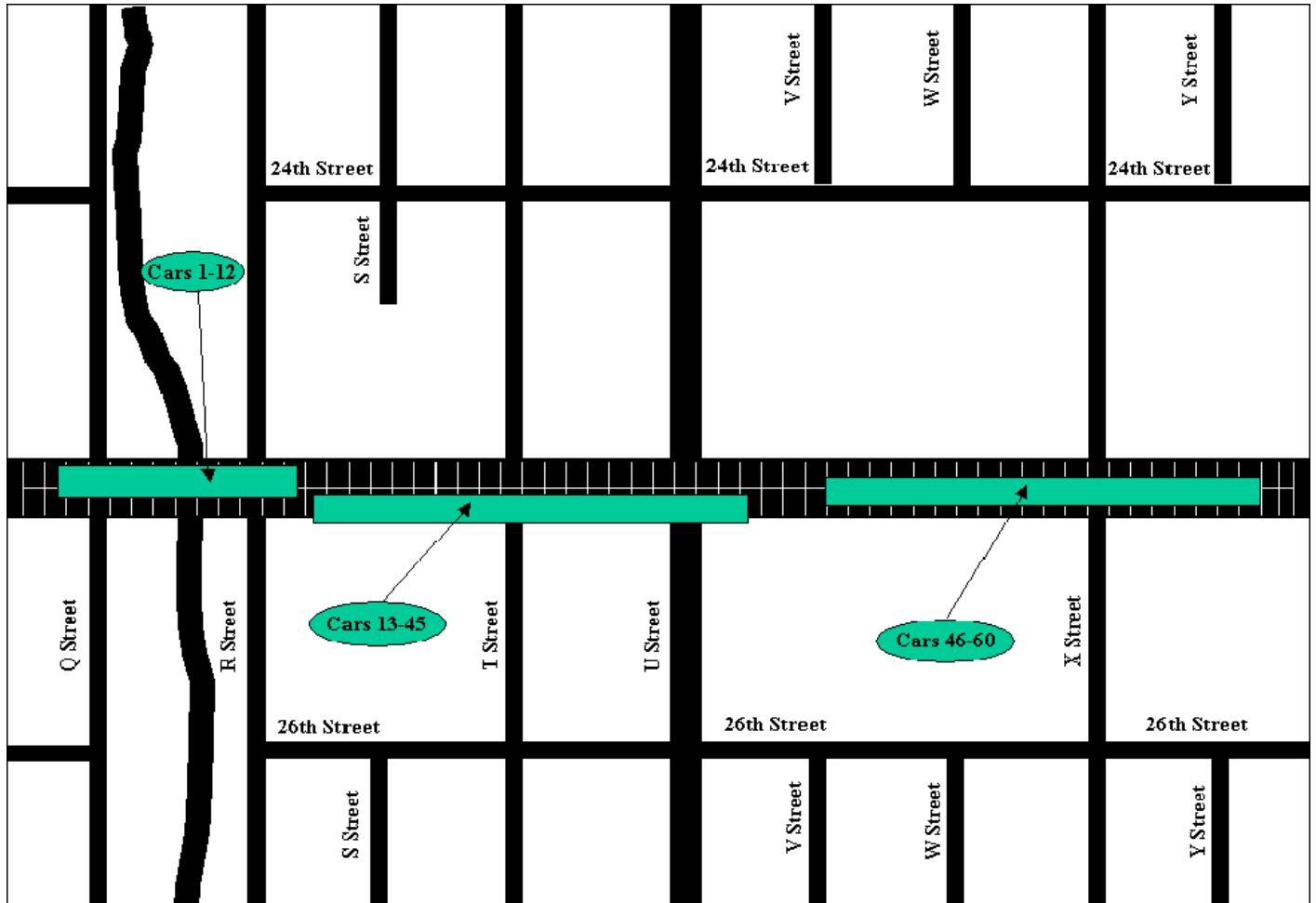
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SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name: CC Train Derailment	2. Operational Period: Date From: 1/22 Time From: 1200	Date To: 1/22 Time To: 2400
3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan: ○ Know where you and your crew members are at <u>"all"</u> times. Lookouts Communication Escape Route Safety Zones PPE: Personal protective equipment continues to be our first line of defense against injury or potential exposures. Level D is the minimum level of PPE for any field assignment. Level D is defined as: Durable clothing (long pants), steel toed-boots, safety glasses with side protection, goggles and aprons if needed for splash protection, hard hat if impact or overhead hazards are present, ear plugs for equipment or other loud noises, N-95 respirators for dust or odor and gloves (leather, nitrile, etc.) as needed for the task. The IAP 204 forms list additional PPE requirements (Level C & B) specific to each operational assignment. If you have questions about the selection or use of PPE specified for any operation, please ask your supervisor and safety officer. ➤ PPE!!! ➤ Warning Alarms!!! ➤ Escape Routes!!! ➤ Accountability!!!		
4. Site Safety Plan Required? Yes ☐ No ☒ Approved Site Safety Plan(s) Located At: I C P		
5. Prepared by: Name: N Dennis Position/Title: SOFR Signature: 		
ICS 208	IAP Page 10	Date/Time: 1/22 0800

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Site Map



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Train Incident Traffic Plan

The ICP is located on the corner of 24th Street and W Street. To access the incident from the ICP take 24th Street to X Street to the rail line. The return route to the ICP will follow R Street to 24th Street.

Fuel is located at the corner of 24th Street and V Street.

A mandatory vehicle wash station will be set up at R Street south of 24th Street.

All incident vehicles will be washed prior to release from the incident.

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