

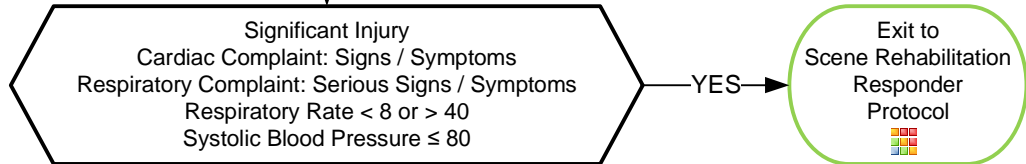


Scene Rehabilitation: General

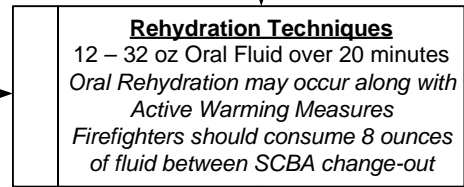
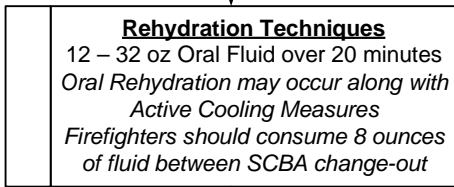
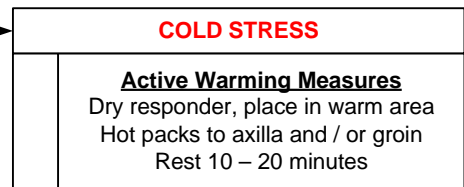
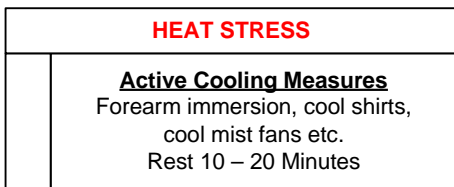
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Injury / Illness / Complaint should be treated using appropriate treatment protocol beyond need for oral or IV hydration.

- Initial Process**
1. Personnel logged into General Rehabilitation Section
 2. VS Assessed / Recorded (If HR > 110 then obtain Temp)
Carbon Monoxide monitoring if indicated
 3. Personnel assessed for signs / symptoms
 4. Remove PPE, Body Armor, Haz-Mat Suits, Turnout Gear, Other equipment as indicated



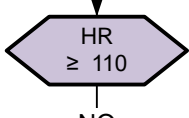
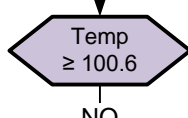
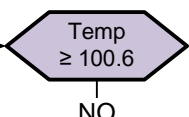
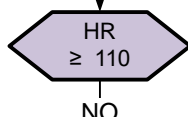
NO



Reassess responder after 20 Minutes in General Rehabilitation Section
Reassess VS

Responder Cannot Wear Protective Gear
Extend Rehabilitation Time Until VS Improve

Extend Rehabilitation Time Until VS Improve



Discharge Responder from General Rehabilitation Section
Reports for Reassignment

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.



MD Notes:

- Responder who fails rehab assessment should go to SO2 protocol.

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 or Policy / Procedure.
- **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.