

# WOOD RIVER FIRE & RESCUE STANDARD OPERATING GUIDELINES

EMERGENCY RESPONSE AND OPERATIONS  
OF  
WOOD RIVER FIRE & RESCUE  
WOOD RIVER, HALL COUNTY, NEBRASKA



Adopted 2/17/2026

By signing below, the undersigned acknowledge review and approval of these Wood River Fire & Rescue Standard Operating Guidelines.

Mayor, City of Wood River	Signature: _____	Date: _____
Fire Chief, Wood River Fire & Rescue	Signature: _____	Date: _____
Wood River Rural Fire Board Representative	Signature: _____	Date: _____

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## 1. MISSION STATEMENT

- 1.1 Protect life and property within Wood River and Rural Fire District.
- 1.2 Deliver high-quality fire protection and emergency medical services.
- 1.3 Provide mitigation and public safety education.
- 1.4 Operate professionally, safely, and progressively.

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## 2. GENERAL GUIDELINES

- 2.1 Full PPE is required unless reduced by the Officer in Charge (OIC) after the scene is declared safe.
- 2.2 Drivers may respond in street clothes and don PPE upon arrival.
- 2.3 Officers/EMS outside Immediate Danger to Life and Health Zone (IDLHZ) may reduce PPE when appropriate.
- 2.4 All personnel must be seated and belted before the apparatus moves.
  - 2.4.1 Riding in non-approved seating positions is prohibited.
- 2.5 Only Chief-authorized personnel may operate the apparatus.
  - 2.5.1 Drivers must demonstrate operational knowledge before authorization.
- 2.6 Smoking prohibited in or on apparatus.
- 2.7 Apparatus status updates to GIEC:
  - 2.7.1 Enroute - Include which officer(s), if any, are on board
  - 2.7.2 On Scene
  - 2.7.3 Leaving Scene
  - 2.7.4 Back at Station
- 2.8 First-arriving unit provides size-up and conditions report.
- 2.9 Only a WRFD officer or GIEC may order disregard and return to the station

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## 3. EMERGENCY VEHICLE DRIVING

- 3.1 The driver is responsible for safe operation at all times.
- 3.2 Nebraska traffic laws apply.
- 3.3 Lights/sirens request right-of-way, do not guarantee it.
- 3.4 Maximum recommended speed: 15 mph over limit (favorable conditions only).
- 3.5 The posted limit is maximum under poor conditions.
- 3.6 Full stop required at red lights, stop signs, and blind intersections.
- 3.7 Defensive driving required.
- 3.8 Backing minimized; use spotter or 360° walk-around.
- 3.9 All personnel must wear seatbelts.
  - 3.9.1 The driver should confirm that all personnel have seat belts on before moving
- 3.10 EMS may remove the seat belt only if patient care requires.
- 3.11 Do not pass emergency vehicles unless authorized.
- 3.12 Apparatus positioned to protect crews at roadway incidents

- 3.12.1 TIM's standards and regulations should always be followed.
- 3.13 High-visibility apparel is required in traffic environments.
- 3.14 Safe arrival takes priority over speed.

## 4. RADIO COMMUNICATIONS GUIDELINES

4.1 Clear, concise transmissions only.

4.1.1 All radio transmissions on the County Fire repeater channel shall have the prefix **"Wood River"** in front of any identification, i.e., "Wood River Unit 31 on scene".

- 4.2 Listen before transmitting.
- 4.3 Repeat critical messages.
- 4.4 Plain English preferred.
- 4.5 Only IC communicates directly with GIEC at the scene.

4.6 Channel assignments:

- 4.6.1 Channel 1 – County Fire Dispatch
- 4.6.2 Channel 5 – WRFD Fireground
- 4.6.3 Channel 6 – Fireground Talk-around

- 4.7 Portable radios on Channel 5 during WRFD incidents.
- 4.8 Mutual aid assigned fireground channel as needed.
- 4.9 Maintain radio contact in hazardous environments.

4.9.1 All WRFD radios have these 5 frequencies.

- 4.9.1.2 ..... 1 County Fire Repeater Dispatch
- 4.9.1.3 ..... 2 County Fire talk around
- 4.9.1.4 ..... 3 County common Fire Ground
- 4.9.1.5 ..... 5 Fireground Repeater (WRFD only)
- 4.9.1.6 ..... 6 Fireground Talk-around of 5

Channel #	RX	TX	SQL	NAME	RADIO DISPLAY NAME & CHARTERS
1	453.4750	458.4750	127.3	HALL COUNTY FIRE	HC FIRE
2	453.4375	458.4375	127.3	HC Fire 2	HCFIRE 2
3	453.4750	<---	127.3	HALL COUNTY FIRE TA	HC F TA
4	460.5875	465.5875	D632	HC Ops 3	HC OPS 3
5	460.5750	465.5750	127.3	WR Fire	WR FIRE
6	460.5750	<---	127.3	WR Fire TA	WRFIRETA
7	458.8750	<---	71.9	FIREGROUND	FIREGROU
8	453.2125	<---	156.7	UCALL40D	UCALL 40
9	453.4625	<---	156.7	UTAC41 - Tactical	UTAC 41
10	453.7125	<---	156.7	UTAC42 - Tactical	UTAC 42
11	453.8625	<---	156.7	UTAC43 - Tactical	UTAC 43
12	458.1000	<---	156.7	Emergency 1	HC EM 1
13	458.6250	<---	156.7	Emergency 2	HC EM2
14	465.1750	<---	156.7	Emergency 3	HC EM 3
15	465.5500	<---	156.7	Emergency 4	HC EM 4

## 5. EMERGENCY VEHICLE DRIVER REQUIREMENTS

- 5.1 Under 18 – No emergency vehicle operation.
- 5.2 18–21 – Trainee status only unless authorized.
- 5.3 DMV checks are required and will be periodically checked
- 5.4 No Class A violations permitted.
- 5.5 Maximum two Class B violations in three years.
- 5.6 Class A violation results in a 24-month driving suspension + retraining.
- 5.7 Repeated Class B violations cause progressive discipline.
- 5.8 Personal vehicle misuse while on department business is subject to discipline.
- 5.9 Supervised training is required prior to authorization
- 5.10 The Chief Officer may revoke driving privileges at any time.

## 6. "ON-DUTY" POLICY

- 6.1 Member on duty once aware and responding.
- 6.2 Remains on duty until officially released and arrives back home or other first destination
- 6.3 Applies to:
  - 6.3.1 Emergency responses
  - 6.3.2 Training
  - 6.3.3 Maintenance
  - 6.3.4 Department business

## 7. COMMUNICABLE DISEASE PROTOCOL

- 7.1 Gloves required for all patient contact.
- 7.2 Treat all patients as potentially infectious.
- 7.3 Wash hands immediately after exposure.
- 7.4 Remove contaminated clothing immediately.
- 7.5 Clean equipment using a 1:9 bleach solution.
- 7.6 Report significant exposures immediately.
- 7.7 Complete Incident and Workers Compensation forms.
- 7.8 Hepatitis B, tetanus, and flu vaccines will be available to all members.
- 7.9 Significant exposure is defined as body fluid contact with mucous membranes or open skin.
  - 7.9.1 Significant exposure should be reported to an officer immediately.
  - 7.9.2 The officer shall report the exposure to the Infection Control Officer, Safety Officer, or Incident Commander
  - 7.9.3 Fill out a workman's compensation form within 7 days and file this form with the city clerk

## 8. INITIAL FIRE SCENE OPERATIONS

- 8.1 Perform size-up and determine the need for additional resources.
- 8.2 Proper apparatus placement.
- 8.3 Establish Command.
- 8.4 Lay and charge (1 ¾" ) or larger hose line.
- 8.5 Establish water supply.
- 8.6 Conduct fire knockdown and initiate Search and Rescue / RIT. 8.7
- 8.7 Protect exposures.
- 8.8 Provide traffic control.
- 8.9 Coordinate ventilation with attack.
- 8.10 Conduct salvage operations.
- 8.11 Ambulance responds to:
  - 8.11.1 Structure fires
  - 8.11.2 HazMat incidents
  - 8.11.3 Entrapments
  - 8.11.4 Wildland Fires

## 9. RECOMMENDED RESPONSE ASSIGNMENTS

9.1 Structure Fire (City) –	Engines + 99-1 + mutual aid with Cairo and Alda.
9.2 Structure Fire (Rural) –	Engines + 99-1 + mutual aid with Cairo and Alda.
9.3 CO/Alarm –	Engine + 99-1.
9.3.1 Investigations/ alarms	Engine + 99-1
9.4 Vehicle Fire –	Engine + 99-1.
9.5 Grass Fire –	Wildland units + 99-1.
9.6 MVA –	99-1/99-2 + Rescue units.
9.7 HazMat –	Operations-level units + ambulance.
9.8 Code Blue –	99-1 or 99-2.

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## 10. VEHICLE FIRE RESPONSE

- 10.1 Respond with Class A Pumper (Engine 30, 32, or 41)
    - 10.1.1 Stop 500 feet out for HazMat assessment if a commercial vehicle is involved.
  - 10.2 Full PPE and SCBA required.
  - 10.3 Establish a 100-foot danger zone.
  - 10.4 Minimum 1¾" attack line.
  - 10.5 Attack from vehicle sides.
  - 10.6 Monitor traffic hazards continuously and follow all TIMS protocols
- 

## 11. VEHICLE ACCIDENT RESPONSE

- 11.1 Ambulance response (99-1 and/or 99-2) required.
  - 11.2 Rescue pumper responds with extrication equipment.
    - 11.2.1 Consider One 1¾" Protection Line Charged and Manned (Min.)
  - 11.3 500-foot HazMat assessment for trucks.
  - 11.4 Full PPE is recommended.
  - 11.5 Establish a 100-foot danger zone.
    - 11.5.1 Traffic control as needed and follow all TIMS protocols
  - 11.6 Stage 20 lb extinguisher.
  - 11.7 Charged protection line recommended.
- 

## 12. VEHICLE EXTRICATION

- 12.1 Full PPE required.
  - 12.2 Stabilize the vehicle immediately.
  - 12.3 Assist EMS with patient stabilization.
  - 12.4 Fire extinguisher staged.
  - 12.5 Protection line recommended.
  - 12.6 Establish traffic control.
  - 12.7 Only trained personnel operate extrication tools.
-

## 13. STRUCTURE FIRE INTERIOR ATTACK

- 13.1 Full PPE and SCBA required.
  - 13.2 Minimum 1¾" attack line.
  - 13.3 1¾" backup line required.
  - 13.4 Buddy system mandatory for all interior hose teams
  - 13.5 Two-person RIT in full PPE.
  - 13.6 Maintain adequate water supply.
  - 13.7 Abort interior attack if unsafe conditions develop.
    - 13.7.1 Three blasts of the warning horn shall mean immediate abandonment of the structure
  - 13.8 Members in training can go in with an experienced firefighter for overhaul
- 

## 14. SEARCH AND RESCUE

- 14.1 Full PPE required.
  - 14.2 SCBA as needed.
  - 14.3 Buddy system mandatory.
  - 14.4 Charged 1¾" handline preferred
  - 14.5 A backup firefighter in full gear with SCBA will be assigned for every FF inside the structure.
  - 14.6 Exterior firefighters posted at windows and doors to aid rescue and monitor progress.
  - 14.7 Abort if conditions deteriorate.
    - 14.7.1 Three blasts of airhorn or alert on SCBA pass devices signal immediate abort
- 

## 15. SMOKE INVESTIGATION

- 15.1 Full PPE required.
  - 15.2 SCBA as needed.
  - 15.3 Buddy system required.
  - 15.4 A charged protection line should be established.
  - 15.5 A backup firefighter in full gear with SCBA will be assigned for every FF inside the structure
- 

## 16. VENTILATION OPERATIONS

- 16.1 Full PPE and SCBA.
  - 16.2 Buddy system.
  - 16.3 Lifeline required for roof operations.
  - 16.4 Two points of egress established.
  - 16.5 Coordinate with the attack crew.
  - 16.6 Abort if roof instability is observed.
- 

## 17. OVERHAUL

- 17.1 Full PPE required.
- 17.2 SCBA until the atmosphere is confirmed safe.

- 17.3 Charged 1" or larger protection line.
  - 17.4 Continue until rekindled.
- 

## **18. HAZARDOUS MATERIALS INCIDENTS**

- 18.1 Full PPE and SCBA.
  - 18.2 Assess from a safe distance.
  - 18.3 Consider wind/terrain/weather and environment
    - 18.3.1 Contact EC to determine longer-term wind speed and direction
  - 18.4 Establish an isolation zone.
  - 18.5 Safety of personnel priority.
    - 18.5.1 Size will be determined by the commanding officer
  - 18.6 Notify the regional HazMat Team if needed.
    - 18.6.1 Grand Island City Hazmat team would be the preferred response team
- 

## **19. HAZMAT RESPONSE POLICY**

- 19.1 WRFD operates at the Operations Level only.
  - 19.2 Limited to rescue, fire suppression, and containment.
  - 19.3 No cleanup operations performed.
  - 19.4 No financial responsibility assumed.
- 

## **20. ROADWAY OPERATIONS**

- 20.1 Control traffic before operations begin.
  - 20.2 Block the incident lane and one buffer lane and follow all TIMS guidelines.
  - 20.3 Stage second apparatus ¼ mile back if possible.
    - 20.3.1 Place a traffic sign behind the apparatus if manpower is available
  - 20.4 Shut the road if smoke obscures visibility.
  - 20.5 High-visibility PPE required.
- 

## **21. RANGELAND FIRES**

- 21.1 Wildland gear is considered full PPE for rangeland fires
    - 21.1.2 Use of particulate masks is recommended.
  - 21.2 Monitor weather conditions.
  - 21.3 Establish escape routes.
    - 21.3.1 Close roads and/or detour traffic if smoke obscures roadways
  - 21.4 Establish a water shuttle early.
    - 21.4.1 Consider setting up a dump tank and shuttle operations to ensure a water supply
    - 21.4.2 Consider the use of wetting agents
  - 21.5 Attack from black when possible.
  - 21.6 Use flank-to-head strategy.
  - 21.7 Supplemental ignition only with approval.
-

## 22. MUTUAL AID

- 22.1 Maintain WRFD district coverage.
  - 22.2 Early mutual aid encouraged if resources are taxed
  - 22.3 Specify needed resources.
  - 22.4 Automatic mutual aid to Cairo and Alda.
  - 22.5 Respond to others with equal urgency
    - 22.5.1 Respond with the same resources as per the WRFD SOG's fire in our district
- 

## 23. ELECTRICAL EMERGENCIES

- 23.1 Full PPE required.
  - 23.2 Establish a minimum danger zone based on the voltage of the charged line.
  - 23.3 Request the power company immediately.
  - 23.4 Treat all wires as energized.
    - 23.4.1 Members are discouraged from cutting electrical wires for safety reasons
- 

## 24. INJURIES

- 24.1 All injuries and biohazards are treated as an EMS incident.
  - 24.2 Encourage transport.
  - 24.3 Refusals documented.
  - 24.4 Report to Safety Officer.
  - 24.5 Injured personnel receive priority care above all other operations
  - 24.6 Medical monitoring required after extreme exertion.
- 

## 25. SCBA POLICY

- 25.1 Required for:
    - 25.1.1 Structure fires
    - 25.1.2 Overhaul
    - 25.1.3 Vehicle fires
    - 25.1.4 HazMat
    - 25.1.5 Search and Rescue
    - 25.1.6 Ventilation
    - 25.1.7 Grass fires (as needed)
  - 25.2 Only trained personnel use SCBA.
  - 25.3 User responsible for cleaning and maintenance.
- 

## 26. CONTROLLED BURNS

- 26.1 Burns without a permit are evaluated.
  - 26.2 May be extinguished.
- 26.3 Blatant violations subject to citation.

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## **27. FIREGROUND OFFICER PRIMARY DUTIES**

- 27.1 Chief – Overall command.
- 27.2 Assistants – Support/assume command.
- 27.3 Safety Officer – Personnel safety & accountability.
  - 27.31 There should be a Safety officer at every scene
- 27.4 Captain – Company operations
- 27.5 Lieutenant – Lead assigned team.

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## **28. FIREFIGHTER PRIMARY DUTIES**

- 28.1 Apparatus operation, including but not limited to water supply and pump operations
- 28.2 Fire attack, including but not limited to obtaining entry, search and rescue
- 28.3 Ventilation.
- 28.4 Water supply, including but not limited to dump tank establishment and water shuttles
- 28.5 Utility control.
- 28.6 Traffic control.
- 28.7 Salvage & overhaul.
- 28.8 Apparatus readiness.

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## **29. FIRE GROUND IDENTIFICATION**

- 29.1 Chief – White helmet.
- 29.2 Safety – Orange helmet.
- 29.3 Rescue Captain – Blue helmet.
- 29.4 Line Officers – Red helmet.
- 29.5 Firefighters – Black helmet.
- 29.6 EMT – Star of Life.
- 29.7 Paramedic – Identifier.
- 29.8 Probation members - Yellow

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## **30. BOMB / TERRORIST THREAT RESPONSE**

- 30.1 All personnel report to the station.
  - 30.2 No response unless ordered.
  - 30.3 Do not search the device.
  - 30.4 Law Enforcement has primary authority.
-

## **31. ACTIVE SHOOTER / HOSTILE EVENT RESPONSE**

### **31.1 Purpose**

- 31.1.1 Provide standardized interoperable response for hostile events.
  - 31.1.2 Integrate with Law Enforcement under Unified Command.
  - 31.1.3 Establish Hot/Warm/Cold operational zones.
  - 31.1.4 Deploy Rescue Task Force (RTF) when appropriate.
  - 31.1.5 Provide rapid hemorrhage control, triage, and evacuation.
- 

### **31.2 Scope**

- 31.2.1 Active shooter incidents.
  - 31.2.2 Barricaded suspect with ongoing threat.
  - 31.2.3 Mass casualty violence events.
  - 31.2.4 Incidents involving suspected IED or secondary devices.
- 

### **31.3 Operational Zones**

- 31.3.1 Hot Zone (Red) – Direct threat.
  - 31.3.2 Warm Zone (Yellow) – Secured by Law Enforcement; RTF operations allowed with armed protection.
  - 31.3.3 Cold Zone (Green) – Command, triage, treatment, transport.
- 

### **31.4 Guiding Principles**

- 31.4.1 Law Enforcement clears threats.
  - 31.4.2 WFRD does not clear buildings.
  - 31.4.3 Continuous risk/benefit evaluation.
  - 31.4.4 Immediate hemorrhage control saves lives.
  - 31.4.5 Assume secondary hazards (IED, ambush, fire, HazMat).
- 

### **31.5 Dispatch & Initial Actions**

- 31.5.1 Stage at a safe location.
  - 31.5.2 Do not self-deploy.
  - 31.5.3 Establish WFRD Command.
  - 31.5.4 Request Unified Command with Law Enforcement.
  - 31.5.5 Request additional ambulances early.
  - 31.5.6 Assign Staging, Safety, Medical Group Supervisor.
- 

### **31.6 Unified Command Objectives**

- 31.6.1 Threat suppression (LE).
- 31.6.2 Rapid victim access (RTF).

- 31.6.3 Triage, treatment, transport.
  - 31.6.4 Scene control and evidence preservation.
- 

## **31.7 Rescue Task Force (RTF)**

- 31.7.1 Typical team: 2–3 Fire/EMS + 2–3 armed LE.
  - 31.7.2 Mission:
    - 31.7.2.1 Move under cover.
    - 31.7.2.2 Perform immediate lifesaving care only.
    - 31.7.2.3 Rapid extraction to CCP (Critical Control Points).
  - 31.7.3 Warm Zone Treatment Priorities:
    - 31.7.3.1 Tourniquets.
    - 31.7.3.2 Wound packing.
    - 31.7.3.3 Pressure dressings.
    - 31.7.3.4 Airway positioning.
    - 31.7.3.5 Chest seals (per protocol).
    - 31.7.3.6 Hypothermia prevention.
- 

## **31.8 MCI Integration**

- 31.8.1 Activate WRFD MCI Plan if multiple victims.
  - 31.8.2 Establish CCP.
  - 31.8.3 Establish Triage, Treatment, Transport zones.
  - 31.8.4 Separate walking wounded.
  - 31.8.5 Early hospital notification.
- 

## **31.9 PPE & Equipment**

- 31.9.1 Agency-approved body armor.
  - 31.9.2 Eye/ear protection.
  - 31.9.3 Tourniquets (multiple).
  - 31.9.4 Hemostatic gauze.
  - 31.9.5 Pressure dressings.
  - 31.9.6 Chest seals.
  - 31.9.7 Triage tags.
  - 31.9.8 Radios (interoperable).
- 

## **31.10 Withdrawal Triggers**

- 31.10.1 Gunfire/explosion near the team.
  - 31.10.2 Loss of force protection.
  - 31.10.3 Radio failure.
  - 31.10.4 Discovery of suspicious device.
  - 31.10.5 LE declares the zone unsafe.
-

## 31.11 Post-Incident

- 31.11.1 Coordinate evidence preservation with LE.
  - 31.11.2 Establish rehab and medical monitoring.
  - 31.11.3 Activate CISM resources.
  - 31.11.4 Conduct After Action Review.
- 

## 32. MASS CASUALTY INCIDENT

- 32.1 Activate when patients exceed resources.
    - 32.1.1 Response goals **TREAT**
      - 32.1.1.1 **T**- Triage all patients
      - 32.1.1.2 **R**- Rapidly move, collect, and organize patients
      - 32.1.1.3 **E**- EMT for each patient within 20 minutes
      - 32.1.1.4 **A**- Ambulance en route to administer BLS
      - 32.1.1.5 **T**- Tell hospital to prevent overload
  - 32.2 **SALT** triage used.
    - 32.2.1 **Sort**
    - 32.2.2 **Access**
    - 32.2.3 **Life-saving**
    - 32.2.4 **Treat and transport**
  - 32.4 Notify hospitals early.
  - 32.5 Red / Yellow / Green / Black categories.
    - 32.5.1 **Red** - Unless treated urgently, death could result
    - 32.5.2 **Yellow** - Seriously injured but can survive with delayed transport
    - 32.5.3 **Green** - Walking wounded, non-life-threatening injuries
    - 32.5.4 **Black** - Deceased or so gravely injured they will not survive transport
- 

## 33. SEVERE WEATHER SPOTTER OPERATIONS

- 33.1 Activation by Chief/EM/NWS.
- 33.2 Station staffed as a base
  - 33.2.1 In the event of a power loss and generator failure, open overhead doors at the station
  - 33.2.2 Man communications in the radio room, which is also a tornado shelter
  - 33.2.3 Apparatus in the station should be removed if a tornado is tracking towards town
  - 33.2.4 If a direct hit is imminent, all station equipment may be evacuated
- 33.3 Channel 5 or 6 used.
  - 33.3.1 Report wind direction and speed
  - 33.3.2 Hail and its size
  - 33.3.3 Threatening cloud formations, including rotation and funnel clouds
- 33.4 Minimum two personnel per team.
  - 33.4.1 Teams positioned at points around the district as dictated by the storm
  - 33.4.2 Teams should ideally be positioned 2-10 miles SE of the leading edge storm front

- 33.4.3 Spotter teams should immediately notify the base if they move
  - 33.5 Roll call every 15 minutes.
  - 33.6 No emergency response during a tornado strike.
    - 33.6.1 If a strike occurs, establish ICM and activate WR LEOP
- 

## **34. EMERGENCY INCIDENT REHABILITATION**

- 34.1 Rehab established early
    - 34.1.1 Should provide an area for physical rest
    - 34.1.2 Far enough from the scene so gear can be doffed
    - 34.1.3 Suitable protection from environmental concerns
    - 34.1.4 Free from exhaust fumes
    - 34.1.5 Accessible by EMS units
  - 34.2 Hydration mandatory.
    - 34.2.1 Sufficient nourishment and hydration beverages should be provided
  - 34.3 One bottle / 45-minute guideline.
  - 34.4 HR >110 or Temp >100.6°F requires extended rehab.
  - 34.5 EMS monitoring required.
    - 34.5.1 EMS has the authority to remove a FF from duty if they deem it appropriate
      - 34.5.1.2 The safety officer should be notified
    - 34.5.2 All EMS actions should follow recommended documentation practises
  - 34.6 Blue accountability tags collected.
- 

## **35. PERSONNEL ACCOUNTABILITY SYSTEM**

- 35.1 Two tags per member.
  - 35.2 RED tag = Removed when on scene and placed on the collection ring of the primary engine.
  - 35.3 BLUE tag = Pulled and given to the appointed door officer
    - 35.3.1 FF are limited to two entries per incident.
  - 35.4 Missing tag triggers search.
  - 35.5 Members retrieve their own tags only after the incident is cleared.
    - 35.5 Wildland Fire Accountability Tags
      - 35.5.1 Accountability System to be determined at the scene
- 

## **36. FIRE SCENE INVESTIGATION**

- 36.1 Determine origin and cause
- 36.2 Preserve evidence.
- 36.3 Treat suspicious fires as crime scenes.
- 36.4 Request an investigator for major or suspicious incidents.
  - 36.4.1 Arson, incendiary, or suspicious fires
  - 36.4.2 incendiary patterns, trailers, or devices (electrical, chemical, mechanical).
  - 36.4.3 Multiple origins or uncommunicated fires
  - 36.4.4 Prior or habitual fires
  - 36.4.5 Fires preceded by apparent preparation
  - 36.4.6 Fires that burn or injure anyone

- 36.4.7 Unusual conditions and locations of burnings
  - 36.4.8 Suspicious comments and actions of occupant
  - 36.4.9 Condemned property or proceedings for removal of a structure
  - 36.4.10 Fires prior to or during redecoration or renovation
  - 36.4.11 Fires damaged or pre-burned contents are found
  - 36.4.12 Fires of property listed for sale
  - 36.4.13 Fires discovered by habitual persons
  - 36.4.14 Fires possibly connected to riots or civil disturbances
  - 36.4.15 Fires recently preceded by acts of vandalism
  - 36.4.16 Evidence of any crime
  - 36.4.17 Resulting in fatalities
  - 36.4.18 In connection with an explosion
  - 36.4.19 Significant monetary loss
  - 36.4.20 That may have legal ramifications
  - 36.5 Any fire meeting any of the above shall be considered a crime scene
  - 36.6 If a fire investigator is unavailable, contact the County Attorney
- 

## **37. RAPID INTERVENTION TEAM (RIT)**

- 37.1 Required for interior/IDLH operations. (Immediately Dangerous to Life or Health)
  - 37.2 Deploy only by IC.
  - 37.3 Dedicated tools staged.
  - 37.4 Spare SCBA staged.
  - 37.5 Mayday monitored.
  - 37.6 Evacuation signals:
    - 37.6.1 Three Air horn blasts
    - 37.6.2 "Evacuate, Evacuate, Evacuate."
    - 37.6.3 "Coffee Break" (medical hazard)
- 

## **38. STRESS MANAGEMENT (CISM)**

- 38.1 Activated for traumatic incidents.
  - 38.1.2 Loss by death of an emergency worker
  - 38.1.3 Serious injury of an emergency worker
  - 38.1.4 Prolonged incident with loss of life or serious injury
  - 38.1.5 Incidents involving children
  - 38.1.6 High-emotion impact incidents
  - 38.1.7 Mass casualty incidents
  - 38.1.8 Multiple incidents in a short time
- 38.2 Participation is voluntary.
- 38.3 Conducted within 24–48 hours.
- 38.4 Confidential.

- 38.4.1 Only people involved at the scene will be admitted
- 38.5 No performance critique.
- 38.6 Activated by Nebraska State Patrol.
  - 38.6.1 Call number is 308-385-6000

## **EMS SOG's**

### **EMS SOG 101 — EMS Dispatch and Communication**

#### 101.1 Dispatch:

101.1.2 Dispatch via Active911 (required for all personnel).

101.1.3 Personnel should indicate availability via the app.

101.1.4 Ambulance driver notifies EC when leaving station via Hall County Fire frequency and includes staffing level (e.g., en route with EMTs/paramedic).

101.1.5 Notify GIEC: arrival; leaving scene and destination hospital; leaving hospital; return to station; back in station.

101.1.6 Clear text encouraged for radio communications.

101.2 Hospital communication should be done via cell phone.

### **EMS SOG 102 — EMS Unit Designation, Staffing, and Licensure**

#### 102.1 Unit designations:

102.1.2 99-1 (primary frontline); 99-2 (secondary/backup/surge).

102.2 All EMS personnel must maintain current Nebraska licensure

102.2.1 Appropriate to the level of practice and operate within the authorized scope.

#### 102.3 Medical control:

102.3.1 Deliver care per state-approved Nebraska EMS protocols

102.3.2 WRFD Medical Director-approved protocols

102.3.3 Online/offline medical direction when required

102.3.1 One Dose app as reference.

### **EMS SOG 103 — Ambulance Readiness and Responsibility**

#### 103.1 WRFD is responsible for:

103.1.1 Readiness,

103.1.2 Mechanical condition,

103.1.3 Sanitation/infection control, and

103.1.4 Restocking/inventory control for 99-1 and 99-2.

#### 103.2 Unit status designations:

103.2.1 In Service

103.2.2 Out of Service

103.2.3 Maintenance Required.

103.3 Lead EMT notifies department of maintenance needs by email and Teams posting.

### **EMS SOG 104 — Post-Call Unit Restoration (Nebraska Compliance)**

104.1 Crew completing a call shall restore the unit immediately prior to returning to service.

104.2 Cleaning/decontamination:

- 104.2.1 Use approved disinfectants
- 104.2.2 Clean patient compartment
- 104.2.3 Stretcher/restraints
- 104.2.4 Monitor/cables
- 104.2.5 Oxygen
- 104.2.6 Suction.
- 104.3 Supply restocking:
  - 104.3.1 Replace used/expired items
  - 104.3.2 Check meds for storage, expiration, and seal integrity
  - 104.3.3 If the hospital lacks supplies, restock from the station
    - 104.3.3.1 If the station lacks supplies, notify via email and Teams.

## **EMS SOG 105 — Equipment and Medication Checks**

- 105.1 Weekly checks for each ambulance:
  - 105.1.2 Oxygen levels
  - 105.1.3 Suction
  - 105.1.4 Monitor
  - 105.1.5 AED readiness
  - 105.1.6 Mechanical CPR device readiness
  - 105.1.7 Med expirations
  - 105.1.8 Safety equipment
  - 105.1.9 Fuel
  - 105.1.10 Emergency lighting/sirens.
- 105.2 Periodic checks:
  - 105.2.1 Full inventory verification
  - 105.2.2 Spare equipment inspection
  - 105.2.3 Battery/charging checks
  - 105.2.4 Temperature monitoring for med storage.

## **EMS SOG 106 — Mechanical Maintenance and Reporting**

- 106.1 Drivers perform a walk-around
  - 106.1.2 Identify issues
  - 106.1.3 Remove units from service when required.
- 106.2 Report mechanical issues to the EMS Officer or Chief and post via email and Teams
  - 106.2.1 Unsafe units remain out of Service until repaired/cleared.

## **EMS SOG 107 — Infection Control and Exposure Management**

- 107.1 Standard precautions: PPE use per Nebraska EMS infection control guidance
  - 107.1.2 Treat all contacts as potentially infectious.
- 107.2 Exposure incidents:

- 107.2.1 Report immediately to the infection control officer
- 107.2.2 Document per NDHHS requirements
- 107.2.3 Follow WRFD post-exposure procedures.

## **EMS SOG 108 — Supply and Medication Management**

- 108.1 Inventory meets Nebraska minimum ambulance equipment standards
  - 108.1.1 Remove expired/compromised supplies immediately.
- 108.2 The last crew using the ambulance is responsible for cleanliness
  - 108.2.1 Full restocking and readiness compliance.

## **EMS SOG 109 — Out-of-Service Criteria**

- 109.1 Place ambulance Out of Service if:
  - 109.1.2 Required equipment missing
  - 109.1.3 Oxygen below minimum
  - 109.1.4 Mechanical safety issues
  - 109.1.5 Sanitation/infection control cannot be completed
  - 109.1.6 Medication security/integrity compromised.

## **EMS SOG 110 — Training, Documentation, and QA/QI**

- 110.1 Training consistent with Nebraska EMS education standards and Medical Director requirements. Personnel are encouraged to use WRFD Fire Rescue Training resources.
- 110.2 Documentation:
  - 110.2.1 PCR's comply with Nebraska reporting requirements
  - 110.2.2 Lead EMT ensures ENARSIS completion within 24 hours
  - 110.2.3 if delegated, place the report in the lock box and notify the assigned person.
- 110.3 WRFD participates in continuous QA/QI as encouraged by NDHHS and medical direction.

## **EMS SOG 111 — Professional Conduct and Compliance**

- 111.1 All EMS personnel:
  - 111.1.1 Operate within the Nebraska scope
  - 111.1.2 Follow Medical Director protocols
  - 111.1.3 Maintain confidentiality (state/federal law)
  - 111.1.4 Represent WRFD professionally.