SAN DIEGO FIRE-RESCUE DEPARTMENT PERSONNEL REHABILITATION (Rehab) PACKAGE

VITAL SIGN PROCEDURES:

Vital signs shall be taken on all personnel who are rotated through Rehab. Personnel are to rest and re-hydrate 15-20 minutes before assessment in Rehab. If the vital signs are determined to be outside of established guidelines, additional rest and hydration shall be instituted. After a minimum of ten additional minutes, the fire fighter will be re-evaluated. If the vital signs are still outside of the guidelines, an additional ten minutes of rehab will be provided. After a third and final evaluation, the firefighter's disposition will be established.

VITAL SIGN PARAMETERS:

Any of the following vital signs require additional time and/or assessment in rehab:

- 1. Signs or symptoms that suggest a need for further medical evaluation including (but not limited to) light-headedness, headache, dizziness, confusion, altered level of consciousness, chest pain, or abdominal pain.
- 2. Pulse > 100/min, symptomatic bradycardia, irregular heartbeat, etc. (All Pulses shall be measured manually)
- 3. Respirations $> 30/\min$
- 4. Blood Pressure: systolic > 160 or < 100 or diastolic > 100
- 5. Temperature (oral or tympanic) > 101 F

It is important to emphasize that these assessment guidelines are only indicators and may not indicate that a medical problem exists. These parameters are established to aid rehabilitation evaluators and to increase the level of protection for personnel. Medical decisions are made on a case-by-case basis with the fire and rescue personnel's welfare in mind.

SEAL COMPLETED FORMS IN THIS ENVELOPE AND SEND TO:

HUMAN RESOURCES



DISPOSITION OF PERSONNEL WITH A CHIEF COMPLAINT OR VITAL SIGNS OUTSIDE ESTABLISHED PARAMETERS:

- 1. The following should occur if SDFD personnel have a chief complaint:
 - a. Medical management of the patient shall be under the direction of the Rehab/Medical Officer until the responsibility is transferred to appropriate personnel.
 - b. A paramedic ambulance is requested through the Incident Commander (IC) if ambulance transport is most appropriate.
 - c. Patient is transported to an appropriate facility, including a hospital, trauma center, burn center; the City's contracted industrial health facility or the employee's "physician of record."
- 2. The Rehab/Medical Officer or designee shall contact a Base Hospital to receive direction if a medical decision is required. This direction may include:
 - a. Consultation to allow fire personnel to return to active duty if they have a preexisting benign condition and they do not request medical attention.
 - b. Compliance with County of San Diego EMT-P Base Hospital Contact Policy.
- 3. Medical decisions are on a case-by-case basis with the fire and rescue personnel's welfare in mind. The IC shall also be informed of consultations with a Base Hospital.
- 4. Once determined medically "Unfit For Duty" by the Medical Officer and IC, clearance from a city-contracted industrial health physician or the employee's physician of record must be received prior to the SDFD personnel/patient returning to duty.

Pulse: > 100/min, Symptomatic bradycardia, irregular heartbeat, etc. Respirations: >30/min BP: >160 systolic or ≤100, or diastolic >100 Comments ္ပ Temp Vital sign Parameters 02 Sat 86 Resp Pulse Time Rank Unit Name (Last, First)

Temperature: (oral or tympanic) > 101F

Signs or symptoms: Light headed, Headache, dizziness, confusion, altered LOC, chest pain or Abd pain.

Comments ၀ Temp Vital sign Parameters 02 Sat ВР Resp Pulse Time Rank Unit Name (Last, First)

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San Diego Fire &Rescue

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REHABILITATION REPORT

DATE:		
INCIDENT NU	JMBER:	
INCIDENT TY	PE:	
ADDRESS:		
REHAB OFFI	CER:	
MEDICAL OF	FICER:	
REHAB MEDI	CAL UNITS:	
AMBULANCE	COMPANY UNIT#	PERSONNEL
SDMSE		
FIRE UNITS: ALARM	1 st	
	and	
	3 rd	
	Strike Team #	
	Strike Team #	
COMMENTS:		
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FD-40 (09-08)		Advisory letters sent
		Personnel Evaluated