# Lessons Learned

## Night Time Hoist Extraction

Four crews (Tahoe IHC, Truckee IHC, Horse-shoe IHC and Ventura County 12) were working the night shift on Division X of the French Fire near North Fork, California. Crews were assigned to construct fireline. The terrain was extremely steep and rocky with a brush, timber and grass fuel component. Fire behavior was an active backing fire.



At approximately 00:53 in the morning, a large snag within the black fell parallel to the fire pe-

rimeter, hit adjacent trees, and caused a shrapnel effect of flying woody debris. A sawyer cutting brush ahead of line construction effort for the Tahoe IHC was struck by an 8" diameter piece of this woody debris. As crewmembers rushed to the downed firefighters aid, he was found to be semi-conscious with a visible laceration to the head (caused by broken hardhat suspension).

"All we heard was whoosh....and then we saw Kevin laying on the ground semi-conscious with a laceration in his scalp." -Tahoe Capt. A Tahoe IHC Captain became the Incident Within and Incident Point of Contact (IWI POC) and immediately called the Communication Unit, with notification of the medical

emergency. Hearing the emergency on the radio, paramedics from Ventura County 12 went immediately to the scene, conducted a patient assessment, and stabilized his neck and head with rolled up saw chaps and fiber tape.

Due to the extent of the firefighter's injury, the medics recommended an aerial extraction.

## Lessons Learned

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At 00:58 the night Operations Section Chief ordered the hoist helicopter. Meanwhile, members of the Truckee crew returned to their vehicles to get oxygen, a backboard and additional medical supplies, and firefighters from Horseshoe IHC and Ventura County 12 searched for hoist extraction sites.

Kern County Helicopter (408) lifted off the ground within 20 minutes

of the incident and headed to the designated latitude/ longitude given by the scene IWI POC. The coordinates were not exact, but close enough to get them within the immediate area to establish adequate



communications with ground resources. Once in the immediate area, the scene IWI POC changed frequencies to those listed in the ICS-205 (Communications Plan).

#### Successes:

- Dutch Creek protocols were in place, understood and followed
- IMT and crews practiced incident within an incident scenarios/ simulations on a regular basis
- Helicopter 408 and crew were a dedicated hoist medevac ship

"Our IMT always tries to conduct an emergency scenario/simulation within a few days of an incident to sharpen our skills for when they might be needed".

-David Cooper—IC

## Lessons Learned Night Time Hoist Extraction

The assigned line medics arrived on scene and assisted Ventura County 12 and Tahoe package the firefighter onto the backboard.

Once on scene, the helicopter crew began lowering the Rescuer. However, rotor wash caused embers and ash to kick up, causing the

From initial call to hospital delivery was approximately 1 hour, 10 minutes.

pilot to abort the operation. A secondary site was also determined to be unacceptable due to embers, ash, and a large snag. A

third site in the green was selected by the Horseshoe IHC, and the IWI POC directed the medevac ship to it. The pilot asked ground personnel to put a glow stick on a string and whirl it around to allow him to identify the hoist site with his Night Vision Goggles (NVG).

The Rescuer was lowered to the ground. Once on scene, he had the rescue basket and additional medical equipment lowered to him. By 02:06 the patient was packaged, and hoisted into the ship. Helicopter 408 then departed for Community Regional Medical Center in Fresno Ca.

"We all were relieved to hear from the pilot that Kevin was conscious and stable when he was taken into the hospital." -Tahoe Hotshot Supt

### **Lessons Learned:**

- Choose extraction site away from fireline or black edge
- When pilots use NVGs, all colors look the same -use glow sticks in a circular or spinning motion to call attention to location
- Having qualified medical personnel and equipment close at hand facilitates prompt patient care