

# Instructions for Completing an ICS 206 WF Medical Plan

1. **Incident/Project Name:** Name of incident or project
  2. **Operational Period:** Operational period document will be used (ex. 06/15/20XX – day -0600-1800)
  3. **Ambulance Services:**
    - Name:** Name of ambulance service
    - Complete Address:** Street address of ambulance service
    - Phone Number & EMS Frequency:** Valid phone number to reach ambulance service or dispatch service. EMS Frequency if available to communicate with Communications or Dispatch (ex. RX – 155.340, RX 155.340, Tone –110.0).
    - Advance Life Support (ALS):** **Yes** = Paramedics, Physician’s Assistants (PA), Registered Nurse (RN), etc. **No** = EMT or lower certification
  4. **Air Ambulance Service:**
    - Name:** Name of Air Ambulance service and call sign if possible
    - Phone Number:** Valid phone number to reach air ambulance or dispatch service.
    - Type of Aircraft & Capability:** Describe type of aircraft (ex. Type 1, 2, 3, Military) and capability (ex. Life Flight with Paramedic, Physician’s Assistant, EMT, Hoist, Emergency Helicopter Extraction, etc.)
  5. **Hospitals:**
    - Name & Address:** Full name of hospital, complete physical address
    - GPS Datum:** WGS 84
    - Coordinate Standard:** Degrees – Decimal Minutes (DDM)
      - Lat - DD° MM.MMM’ North
      - Long - DD° MM.MMM’ West
    - VHF:** Very High Frequency (VHF), frequency for aircraft to contact hospital, or other aviation resources assigned to incident
    - Travel Time:** Total time from fireline to definitive care
    - Phone Number:** Valid phone number to reach ambulance or dispatch service
    - Helipad:** Yes or No
    - Level of Care Facility:** Capability of facility (ex. Level I, II, III, IV, Burn Center)
      - Level I – Total care for every aspect of injury
      - Level II – Ability to provide all aspects of trauma care
      - Level III – Capable of surgery, and intensive care for trauma
      - Level IV – Basic emergency care
- The following information should be included in emergency planning procedures for any staffed location. The plan must be updated, reviewed, and approved during each Planning meeting.**
6. **Area Location Capability:**
    - EMS Responders & Capability:** ex. EMT Smith, Paramedic Jones and ambulance 123 with RN Greene, and EMT Black
    - Equipment Available on Scene:** ex. ALS Trauma Bag, wheeled litter, and SKED stretcher with Jones and Smith
    - Medical Emergency Channel:** Channel 6, Command
    - ETA for Ambulance to Scene:**
    - Approved Helispot:** Lat/Long
  7. **Remote Camp Locations:** complete as pertinent