

Initiated: 02/02/1994	MILWAUKEE FIRE DEPT EMS GUIDELINE EMERGENCY MEDICAL FIELD OPERATIONS	Approved by:
Revised: 10/06/2016		Chief Mark Rohlfing
Revision: 4		M Riccardo Colella, DO, MPH, FACEP
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GENERAL

All Milwaukee Fire Department companies perform Emergency Medical Services functions. It is the responsibility of the incident commander at an EMS alarm to determine what, if any, additional resources are necessary. Requests for additional units/resources are to be made through the incident commander.

The ranking fire department officer is in charge of the scene. Any matters relative to the management of an emergency medical scene are to be addressed after the patient's medical needs have been met.

SERVICE COMPONENTS

1. Engine/Truck Companies/ARVs: Engine or truck or companies, as well as Alternate Response Vehicles (ARVs) may be dispatched as first response units. These companies are to be staffed with a minimum of two Emergency Medical Technicians-Basic (EMT-B).
2. Advanced Life Support (ALS Units): MED units and Paramedic First Response (PFR) companies operate as part of a Milwaukee county-wide paramedic system. MED units are staffed with a minimum of two Emergency Medical Technicians-Paramedic (EMT-P), who are trained and equipped to provide advanced life support (ALS). PFR companies are non-transporting units (engine, truck, and ARV companies) staffed with a full practice EMT-P. These also include mobile responding PFR/ALS units such as PBR (paramedic bicycle response) and UTV (i.e. M22) units.
3. Private Ambulance Service Providers: Private providers, certified by the City, provide BLS transport for the EMS System. BLS transport units are staffed by two persons with a minimum certification of EMT-B. Private providers are designated to cover an ambulance service area.

BATTALION CHIEF

A Battalion Chief is automatically dispatched on the following EMS-related alarms:

- Two or more MED units responding to the same incident
- Special team response
- ALS or TEMS unit responding to an exigent tactical situation
- Extrication assignment
- HEMS request (i.e. Flight For Life)
- Active shooter response
- ALSEVD response ('Ebola' response)
- CBRNE (Chemical/Biological/Radiological/Nuclear/Explosive) response

In addition, the first arriving unit is to request a Battalion Chief when the following situations exist:

1. A multiple casualty incident (MCI). Multiple casualty incidents exist whenever six or more patients may require transport from a single incident.
2. Multiple symptomatic patients with suspected CO poisoning.

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SHARED SERVICES INITIATIVE

The Milwaukee Fire Department and surrounding fire departments mutually provide emergency medical services to our communities based on the belief that emergency responses should receive the closest most appropriate resources regardless of jurisdictional boundaries.

BLS TRANSPORT UNIT

When dispatched to an EMS alarm where it is determined that only basic life support measures are necessary and the patient will be transported, Milwaukee Fire Department units are to request a BLS transport unit for patient transport.

BLS transport units will not respond using red lights and sirens when fire department personnel are on the scene and the patient is stable, except in the following situations:

- Patient is outside in **inclement weather**, inclement defined as weather conditions that may adversely affect the patient's treatment and/or current medical condition.
- Patient is in **public view surrounded by a crowd of people** and their well-being and/or dignity may be in jeopardy due to lack of privacy.
- There is a **perceived threat to safety** such as with an auto accident.

If any of the above situations exist, the dispatcher is to be notified of the BLS Transport Emergency and the reason for the request. MFD units are required to standby until the arrival of the BLS transport unit. When transferring patient care, a verbal report must be given to the BLS transport unit personnel along with available patient demographics. In addition, FAX a draft of the ePCR to the receiving hospital. Company officers are to direct company members to assist BLS transport unit personnel, as deemed appropriate.

If ALS personnel made patient contact, the paramedic responsible for history and physical is required to complete the ePCR prior to placing the unit back in service. The ALS or PFR unit is to remain on the scene until patient care has been transferred to the BLS transport unit. If the ranking paramedic on the scene feels there is no need for additional MFD unit(s) on the scene, other MFD units may be released.

The MFD company standing by is to report the arrival of non-MFD BLS transport units as they arrive on scene to the MFD dispatcher.

ALS TRANSPORT UNIT

When dispatched to an EMS alarm where it is determined that advanced life support measures are necessary Milwaukee Fire Department units are to request an ALS transport unit for patient evaluation and/or transport. Requirements for ALS evaluation are listed under the EMS SOG 'ALS Evaluation Required'.

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1. When a BLS unit is present, MED unit personnel are to have at a minimum the ALS EMS bag and ECG monitor/defibrillator when they arrive at the patient. If they are the only unit on the scene they also are to bring the oxygen kit.
2. MFD BLS company personnel should assist ALS personnel with equipment, treatment, and patient movement.
3. If additional MFD personnel are needed to assist the ALS personnel during transport, the BLS unit is to follow the ALS unit to the receiving hospital without light or sirens to retrieve personnel.

ALS UNIT RESPONSES TO FIRE SCENES, SPECIAL TEAMS, EXTRICATIONS

Upon arrival, the MED unit should park to guarantee rapid egress so operating members or civilians requiring medical attention may be readily transported. Paramedic personnel should load their stretcher with the ALS EMS bag, ECG monitor/defibrillator, and patient movement equipment appropriate for the response (i.e. Megamover, backboard, scoop stretcher). Move to an area clear of the operating area but near enough to readily access their equipment should any patient(s) require immediate life-saving ALS intervention.

- Fire scenes and extrications require full PPE in case a patient must be packaged or cared for in the hot zone.
- Paramedic personnel should evaluate the condition of the patient(s) involved. If multiple patients are involved, the ranking paramedic may assume the responsibility of Paramedic Triage Officer, requesting any additional resources, including BLS transport units, through the Battalion Chief.
- MED units may be assigned to the Rehab Group at a fire incident under the direction of the Incident Commander.

HAZARDOUS SITUATIONS

Incident commanders are not to permit entry of non-MFD BLS transport unit personnel into any hazardous situation.

Patients who require extrication from a hazardous situation are to be removed by Milwaukee Fire Department personnel prior to transferring care to a BLS transport unit.

EXTREME WEATHER PROCEDURES

Extreme Heat: When the apparent temperature reaches 90° F. or greater, based on the Temperature/Heat Index. (See numbered notice STANDARD OPERATING PROCEDURES FOR EXTREME HEAT AND COLD WEATHER CONDITIONS)

Extreme Cold: When the apparent temperature falls to -10° F. or less, based on the Wind Chill Index. (See numbered notice STANDARD OPERATING PROCEDURES FOR EXTREME HEAT AND COLD WEATHER CONDITIONS)

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The above will be determined by the U.S. Weather Service (Mitchell Field).

When conditions of extreme heat or cold are met, the Firefighting Deputy Chief may implement the following protocol:

1. Notification of private ambulance providers that extreme weather conditions exist.
2. Simultaneous dispatch of a BLS transport unit with an engine company or ladder company on any EMS run where a patient may be exposed to the elements.

This protocol will remain in effect until canceled by the Firefighting Deputy Chief. See numbered notice on "Standard Operating Procedures for Extreme Weather Conditions."

INTERFACE WITH THE MILWAUKEE POLICE DEPARTMENT

Emergency Medical Services for Persons in Police Custody

MFD units are required to complete a full patient assessment on all patients, determine the most appropriate means of transport (ALS or BLS), and document all assessment findings on the ePCR.

If BLS transport is requested, MFD units are required to standby until the arrival of the BLS transport unit. When transferring care, a verbal report must be given to the BLS transport unit personnel along with available patient demographics. In addition, FAX a draft of the ePCR to the receiving hospital.

******At no time will MFD units on scene authorize or "clear" a patient to be transported by any means other than ALS or BLS transport unit without completing the proper ePCR patient refusal documentation. If a patient in police custody refuses transport (ALS or BLS) after a patient assessment is completed by MFD personnel, the proper ePCR patient refusal documentation and signature form(s) must be completed with the patient's (or legal guardian) signature.***