THINKING OUTSIDE THE BOX

On November 18, 2005, T3 responded with A38 for an injured person. PSCC placed the truck on the incident because they knew that some type of technical assistance would be required. Retired Captain David Moltrup, who was assigned to T3 for the shift, called for the assistance of a rescue squad when he realized what was at hand. There was an adult male on the roof of a structure with a possible lower leg fracture. It was early winter with freezing conditions and ice accumulating along the roof's surface.

The building was a single story non-combustible commercial structure sandwiched between similar structures within a strip mall. There was no interior roof access or scuttle present although its existence would not have had a significant impact upon the ease of the rescue.

The officer of RS3 was Captain Mike Green; upon arrival on the scene and completing a size up, he and Captain Moltrup considered the following options:

1. **A basket slide down the fly section of the aerial either within the bed section or across the top rails.** There are two problems associated with this type of evacuation. First, sliding the basket down the rails can be dangerous because even if it is guided, there is still the possibility of the basket sliding off the side of the ladder. The guide person could loose footing, fall, etc…. Even if a rope is attached, the basket can still come off the railing. Second, in most cases, the stokes basket usually will not fit between the rails of the fly section. In either case, once the basket is on the turn table, it must be manhandled to the ground. The possibility of dropping the basket still exists, or injuring someone attempting to lift a patient down from above their heads.
2. **A standard aerial/stokes basket evolution.** Technical in nature and time consuming.
3. **A ladder slide with a ground ladder.** Less technical and time consuming. The ladder slide using a ground ladder (depending on what type of basket you have) aids in the stability of the basket as it moves between the rails. T3 and RS3 both have Ferno plastic litters. This basket has guides that run lengthwise underneath and lay across the rungs helping to aid in the baskets movement and stability. In addition, since the basket is oriented "in-line" with the ladder, the rope is under tension during the entire operation. Even if the basket were to slide off the side of the ladder, the rope would hold it without allowing it to hit the ground.

The crews placed a 28 foot extension ladder to the building. Three anchor points on the roof were established; the first was to anchor the tip of the ladder, the second was for the main line (lowering in this case) and the third was a belay line (back-up). The patient was lashed into the basket using the interior/exterior lashing technique. This is a critical step anytime you intend to invert the basket. The main line and belay line were both tied into the basket using a doubled long-tail bowline (standard practice for any stokes operation). The main line was rigged into a rack (6 bar micro rack) for lowering. The belay was managed by a 540 Rescue Belay. The patient was then moved to the ladder and lowered down with ease as the slack was removed from the system.

No big deal, just thinking outside the box.

KEEP IT SAFE!

"DEDICATION TO EDUCATION"