



POLICY AND PROCEDURE

Montgomery County Fire and Rescue Commission

No.: 24-04

Effective Date:

4/1/95

TITLE: VEHICLE ACCIDENT RESPONSE POLICY

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VEHICLE ACCIDENT RESPONSE POLICY

Issued by: Montgomery County Fire and Rescue Commission

Authority: Montgomery County Code Section 21-4B(e)

Effective Date: April 1, 1995

SUMMARY: This operationally-flexible policy ensures the efficient and effective management of fire, rescue and emergency medical services on the scene of personal injury vehicle accidents.

DEADLINES: Montgomery County Fire Board Review: 5/15/94
Dept. of Fire and Rescue Services Review: 5/15/94
Fire and Rescue Corporations Review: 5/15/94

ADDRESS: Address all comments pertaining to this proposed policy to George Giebel, Chairman, Montgomery County Fire and Rescue Commission, 12th Floor, 101 Monroe Street, Rockville, MD 20850.

STAFF: For additional information, you may contact Beth Murphy, Administrative Specialist, Montgomery County Fire and Rescue Commission, on 217-2461.

Sec. 1. Applicability. This policy applies to all fire, rescue, and emergency medical service operational units, the Department of Fire and Rescue Services, the fire and rescue corporations, and all fire, rescue and emergency medical services personnel, both career and volunteer, operating on personal injury accidents.

Sec. 2. Definitions.

- a. **Action circle.** A work area established around the vehicle(s), usually extending ten to fifteen feet in all directions. This area must be kept free of bystanders.
- b. **Crew.** Personnel staffing a specific unit responding to an incident.



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- c. **Extrication.** Use of hydraulic, mechanical, and/or hand tools to free victims who are trapped or pinned in a vehicle.
- d. **Full protective clothing.** Approved helmet, turnout coat, turnout pants, boots, nomex hood, gloves (firefighting type), and eye protection (meeting ANSI Z.87.1-1989).
- e. **Incident Commander.** Senior officer, or designated officer in charge of an incident, responsible for the strategic decisions and the assignments of other supervisory or functional positions necessary to control the incident, in accordance with the Integrated Emergency Command Structure.
- f. **Inner circle check.** Size up, perform preliminary triage, and evaluate hazards and special problems in and near the vehicle(s) to assess immediate life hazards (e.g., wires, fire, etc.), life-threatening injuries, number of victims in and near the vehicles, trapped or pinned victims, and determine the mechanism of injury.
- g. **Outer circle check.** Size up the overall accident scene, especially the area surrounding the action circle. Assess additional hazards (e.g., traffic, fuel leaks, etc.), vehicles involved, victims (e.g., ejected passengers, etc.); determine the need for additional units; and interview witnesses as appropriate.
- h. **Personnel.** All on-duty fire, rescue, and emergency medical services personnel, including both career and volunteer.
- i. **Pinned.** Victim entangled in or impinged upon by displaced metal or wreckage.
- j. **Size up.** Survey the incident scene to determine operational priorities and the need for additional manpower.
- k. **Trapped.** Victim confined within the hazardous area by wreckage or the nature of injuries.
- l. **Unit.** Specific apparatus staffed by a crew responding to an emergency incident.



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- m. **Unit officer.** Officer in charge of a specific unit, certified as a Firefighter/Rescuer III, Rescuer III, or higher rank. An EMS Member may only serve as a **unit officer** on an ambulance; an EMS member certified as an EMT-Paramedic may only serve as a **unit officer** on an ambulance or MICU.

Sec. 3. **Procedure.** Personnel must use the procedures below on all personal injury accident assignments whenever possible. The Incident Commander may deviate from this procedure as necessary. In addition to the responsibilities below, officers must also follow the Incident Command System.

a. **Size-up.**

1. Units must **size up** the incident scene, including performing **inner and outer circle checks**.
2. **Incident Commanders** should make full use of responding rescue squads by assigning the crew to expedite the assessment and treatment process. In addition to using these **units** when victims are trapped or pinned, use them:
 - A. when there are multiple patients, especially when additional EMS **units** are required and the responding rescue squad may be closer;
 - B. if additional vehicle stabilization is, or may be, required; and
 - C. to provide adequate lighting for patient assessment and to ensure **personnel safety**.

b. **Personal Protective Equipment.**

1. All personnel inside the **action circle** must wear **full protective clothing**.



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2. The **Incident Commander** may permit a lower level of protection for personnel working inside the **action circle** solely to provide patient care. The **Incident Commander** may also permit a lower level of protection for personnel who are inside a vehicle or similar confines solely to provide patient care.

c. Vehicle Stabilization.

1. All vehicles involved at the accident scene should be rendered safe, whether occupied or not.
2. Use step chocks or other suitable cribbing to stabilize the suspension of all vehicles when mechanism of injury indicates.
3. Stabilize vehicles found on their sides, roofs, or in other unstable positions.

d. Rescuer Access and Patient Stabilization.

1. Rescuers may enter a vehicle only after it has been properly stabilized.
2. If rescuer safety can be maintained, a rescuer outside the vehicle may manually control the c-spine of an accident victim with suspected cervical spine injuries until the vehicle can be properly stabilized.

e. Extrication. Patient condition, entrapment situation, existing or potential hazards, and available resources will influence **extrication** methods. The officer in charge of the procedure may select the most appropriate technique to free victims.

1. If feasible, assign a rescuer inside the vehicle to assess the **extrication** team's actions and to identify any activity which is detrimental or may cause further injury to the patient.
2. At least one charged 1-1/2" hoseline must be in place to protect victims and rescuers:



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- A. during any extrication procedure;
- B. at any accident scene where flammable liquids have been released; and
- C. at any other time the **Incident Commander** considers appropriate.

f. Unit Assignments

1. Ambulance/Medic Unit

- A. Unit. Position for efficient access and egress; provide adequate access for the Rescue Squad.
- B. Crew. Perform **inner circle check** and determine priority of patients; initiate patient care as appropriate. Perform **outer circle check** if appropriate.

2. Rescue Squad/Extrication Unit

- A. Unit. Position to effectively use all equipment.
- B. Unit Officer. Assume command until relieved by a senior officer. Ensure the completion of **inner and outer circle checks** as necessary, and assume the duties of the rescue/extrication sector officer when directed by the Incident Commander.
- C. Crew. Stabilize the vehicle; extricate, protect and care for the patient; provide scene lighting as directed.

3. Engine Company

- A. Unit. Position to facilitate the use of a pre-connected handline and to ensure the safety of rescuers and patients; provide adequate access for the Rescue Squad.



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- B. **Unit Officer.** Assume command of the incident until relieved by a senior officer; ensure the completion of **inner and outer circle checks**, as necessary; assume responsibilities of the Safety Officer when directed by the Incident Commander.
- C. **Crew.** Begin appropriate patient care and ensure fire suppression equipment is in place. During any **extrication** procedure, at least one charged hoseline must be in place to protect victims and rescuers.

Sec. 4. **Responsibility.** Personnel must follow established infection control procedures at all times.

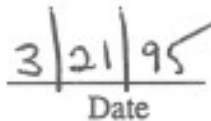
Sec. 5 . **Effective Date.**

This policy is effective on April 1, 1995.

Attest:



George Giebel, Chairman
Fire and Rescue Commission


Date

BFM vehacc.pol 3/14/95