

NWCG Standards for Incident Medical Support June 2015

These standards are sponsored by the NWCG Incident Emergency Medical Subcommittee (IEMS). Questions regarding content in this document may be directed to IEMS members at blm_fa_nwcg_iems@blm.gov.

Considerations:

- Programs may have been established in various geographical areas that fulfill the intent of these recommendations (e.g., Northern Rockies and Pacific Northwest Incident Medical Specialist Programs and Alaska Fire Medics Program).
- These recommended standards can be adapted when resources are sent on non-wildland fire assignments.
- Appropriate licensure of EMTs, AEMTs and Paramedics is necessary for legal authorization to practice (for additional information see [Emergency Medical Responder/Technician Licensing and Wilderness Medical Training Certification](#)).

Resources	Wildland Fire Incident Size/Complexity			
	Initial Attack	Extended Attack (after first burning period)		
		Fewer than 250 Personnel	Between 250 - 500 Personnel	More than 500 Personnel
Personnel				
MEDL	No	IC/AA*	Yes	Yes
Basic First Aid	Yes	Yes	N/A	N/A
EMR	Yes	Yes	N/A	N/A
EMT	IC/AA*	Yes	Yes	Yes
AEMT	No	IC/AA*	IC/AA*	IC/AA*
Paramedic	No	IC/AA*	IC/AA*	IC/AA*
Occupational Health Care	No	IC/AA*	Yes	Yes
Medical Direction & Transport				
Establish Local Medical Direction	N/A	IC/AA*	Yes	Yes
Identify Emergency Transport	Yes	Yes	Yes	Yes
First Aid Kits				
Pocket, Vehicle & Crew	Yes	Yes	Yes	Yes
100 person First Aid Kit (NFES #1760)	No	IC/AA*	Yes	No
500 person First Aid Kit (NFES #1835)	No	IC/AA*	Yes	Yes
Medication & Supplies				
AED	IC/AA*	IC/AA*	Yes	Yes
Oxygen	IC/AA*	IC/AA*	Yes	Yes
OTC Medications	No	IC/AA	Yes	Yes

*IC/AA – Per IC and/or Agency Administrator determination

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Acronyms and Definitions

AA – Agency Administrator

AED – Automated External Defibrillator, a portable electronic device that has the ability to restore a regular heart rhythm during sudden cardiac arrest.

AEMT – Advanced EMT, has all the skills of the EMT, and can also conduct limited advanced and pharmacological interventions. This level allows provision of high-benefit, lower-risk advanced skills by systems that can't support Paramedic-level care.

EMR – Emergency Medical Responder, the first responder level, the EMR possesses skills to provide immediate lifesaving care while awaiting additional resources. The scope of the EMR is limited to foundational skills that can be performed safely with appropriate medical oversight.

EMS – Emergency Medical Services, conducts basic, noninvasive interventions to reduce the morbidity and mortality of acute out-of-hospital emergencies.

EMT – Emergency Medical Technician, conducts basic, noninvasive interventions to reduce the morbidity and mortality of acute out-of-hospital emergencies. They have all the EMR's capabilities, plus additional skills associated with patient transport and are educated to perform interventions using basic equipment.

IC – Incident Commander.

MEDL – Medical Unit Leader.

OTC – Over-the-counter medications and supplies.

Paramedic – Can conduct invasive and pharmacological interventions. Possessing all the skills of the AEMT, Paramedics can also conduct a broader range of interventions based on skills that are harder to maintain and pose greater risk to patients if done incorrectly. Paramedic care is based on advanced assessment and formulating a field impression.