

# TACTICAL DECISION GAMES

## TDG Worksheet - Shooting

### Give initial Considerations:

Prior to arriving on scene are the paramedics prepared for the situation

- Is the Rescue Ambulance properly checked and equipped?
- How credible is the call?
- Are the medics wearing their vests?
- From which direction and how will they approach the scene?
- Are they familiar with the area?
- Should they approach Code 3 or silent?
- Where will they park and where is their escape route/way out?
- Back in or drive in to scene?
- Are they monitoring the police channel on Astro 500?

### On Arrival:

Is the scene safe to enter: -

- Waved in by police officer – is the officer authorized to ‘wave in’?
- Is he the Incident Commander for Police Department?
- If not – who is?
- Are the bystanders being kept at bay? (Only 4 Officers)
- How many shooters were there?
- Where are the shooter/shooters?
- Are any of the victims actually the shooter/shooters?
- Have they been checked by PD?
- Was this a sniper shooting?
- Are there enough Police Officers for the amount of victims/bystanders?
- Is this a gang or unfriendly area?
- Police Officer ‘yelling’ that there are two more victims inside – was this a surprise to him? – should medic be concerned that the inside is not clear and safe to enter?

Location concerns – single family dwelling with chain link fence – multiple civilian vehicles parked outside: -

- Is there only one way in and out of chain link fence?
- Where could a triage area be established?
- Has the back yard been cleared for safety?
- Is there a 'way out' out back?
- Have the vehicles been checked for more victims/shooter?

**Lead Position Considerations: -**

- Have partner initiate triage and report back to Lead
- Set up MCI
- Set up Communications with: -
  - Partner
  - Police Department
  - Incoming resources
  - OCD – give initial information
    - Where am I
    - What do I have
    - What do I need
- Obtain information from partner regarding victims
- Once Engine Company arrives – use to the maximum advantage – ask the Triage medic where they are most needed.

**Additional Resources for 6 Gunshot Victims**

- 6 ALS Rescue Ambulances
- 6 Engine Companies to assist with patients
- 1 Engine Company to assist with scene
  - Traffic issues
  - People/Bystander issues
- Battalion Chief to manage incident
  - Incident Command Package
- 3 EMS Captains for:
  - Communications
  - Triage/Treatment
  - Transportation

**Initial Considerations**

- Contact Base Station or MAC to obtain hospital availability

- Specialty Centers such as
  - Trauma Center
  - Pediatric Trauma Center
  - Perinatal Center
  
- EMS/Fire Captain (Treatment Officer) to set up triage area
- EMS/Fire Captain (Transport Officer) to receive and launch engine companies and rescue ambulances
- EMS/Fire Captain (Communications Officer) to take over communications with Police Department, incoming resources and OCD from Lead Medic
- If Trauma Centers limited or closed catchment (as in the San Fernando Valley) – consider calling helicopter and arranging landing site.
- Time of day and traffic considerations
- Parking and location considerations – can the resources get in and out of area?
- Should the patients be taken to the Rescue or the Rescue go to the patient – is this physically possible?

### **Primary Critical Actions (Patient)**

- # 2 Medic (first on scene) commence START triage
- Assess and tag each victim
- Report information back to lead Medic
- Patient reportedly not breathing – reposition airway – does the victim spontaneously recommence breathing and Medic is still alone – if not - tag as ‘black’ – Morgue. (Insufficient resources).
- Assign first Engine Company on scene to re-assess black tagged patient as resources have changed.
- Assign resources to each patient as available
- Commence emergency medical treatment
  - O2
  - IV’s – 1 or 2 large bore as needed
  - Dressings & Splints as needed
  - Spinal Immobilization as needed

### **Transport Victims**

- Assign Rescue to patient as they arrive – most critical first
- Use Engine Company resources for extra hands or driver as needed
- Transport patients to appropriate facility for injuries
- Have each Rescue contact receiving facility with complete report including Sequence number for patient/MCI completion.
- Re-assess scene for other victims
- Clear scene

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