

Allegheny County Fire Academy
Personal Rehabilitation Report

Instructions:

- This form is to be completed and legible by all personnel (instructors & candidates) participating in live fire/smoke training evolutions.
- Steps shall be taken to reasonably ensure the privacy of protected healthcare information.
- This form will be kept with the all of the other course paperwork upon completion of the course.

Name: _____ DOB: ____/____/____

Address: _____ Blood Type: _____

Emergency Contact Person: _____ Phone: (____) ____-____

Primary Care Physician _____ Phone: (____) ____-____

Sponsoring Agency: _____ Phone: (____) ____-____

Sponsoring Agency Contact: _____ Phone: (____) ____-____

PAST MEDICAL HISTORY: _____

MEDICATIONS: _____

ALLERGIES: _____

COMMENTS: _____

Medical Monitoring/Rehabilitation Instructions:

- All personnel (instructors and candidates) that will be exposed to products of combustion shall have an initial set of vital signs taken prior to any work being done.
- All personnel (instructors and candidates) that participate in an evolution that directly exposes personnel to products of combustion shall report to Rehabilitation immediately following the completion of the exercise.
- All personnel (instructors and candidates) shall remove excess outer clothing to extent possible to allow for passive cooling (i.e. removal of helmet, hood, turnout coat, etc.).
- All personnel (instructors and candidates) shall have their vital signs measured after a minimum of five (5) minutes of rest and rehydration.
- All personnel (instructors and candidates) shall remain in rehabilitation for a minimum of twenty (20) minutes prior to returning to duty.
- Any personnel (instructors and candidates) whose vital signs **are still abnormal** after twenty (20) minutes of rehabilitation or are experiencing any signs or symptoms of other than fatigue WILL be further examined by a licensed EMS agency to determine fitness for duty.

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NAME: _____

Medical Monitoring:

Time	Pulse	Respirations	Blood Pressure	Oral Temperature	SpO2%	SpCO%	Comments & Outcome i.e. Returned to duty, transported, refused treatment/transport, etc.	Taken By
Initial								
1)								
2)								
3)								
4)								
5)								
6)								

Abnormal Vital Signs

Pulse <60 or >120 Respirations <12 or >20 Blood Pressure, Systolic <90 or >200 Blood Pressure, Diastolic >110
Oral Temperature ≥99.5 SpO2% <95% SpCO%: ≥12%