



U.S. Forest Service Fire Operations Risk Management Information Briefing Paper



Date: July 29, 2011

Topic: Interagency work on Heat Illness

Background:

Heat illness has been an uncommon cause of death for federal wildland firefighters, at least for the past 20 years. Each year a number of firefighters suffer various forms of heat illness, but it is rarely fatal. The last Forest Service employee who died from heat illness was a member of the Globe IHC, who died on a training run (alone) in 1996. A Santa Barbara Fire Department employee died from heat stroke (alone) on the Camuesa Fire in 1999 on the Los Padres NF. Cal-OSHA cited Santa Barbara City for that fatality. Aviation accidents, burnovers, driving accidents, heart attacks and hazard trees have each killed far more FS firefighters than heat illness. Even so, the interagency safety and risk management community maintains a focus on research and education in the effort to minimize the risk of heat illness to our firefighters.

Some recent work on heat illness that has occurred in the interagency community includes:

1. *Heat Illness Basics for Wildland Firefighters* Tech Tip produced by MTDC in July 2010.
2. Rhabdomyolysis epidemiological study initiated with NIOSH and CDC December 2010, completed May 2011.
3. Rhabdomyolysis educational materials disseminated May 2011.
4. "Beyond Your Limits" module presented in 2011 Refresher Training with focus on heat illness/overexertion; posted on WFSTAR site.
5. Heat-Related Injuries page included in Incident Response Pocket Guide (IRPG) January 2010.
6. Facilitated Learning Analysis completed on heat illness injury on Dixie NF, July 2010.
7. NWCG Heat Illness Safety Advisory issued July 2009.
8. Hydration Strategies for Firefighters Tech Tip produced by MTDC in June 2009.
9. Firefighter Hydration Evaluation study published by San Dimas TDC in February 2009.
10. "Fitness and Work Capacity" published by MTDC, December 2009.

Key Points:

1. We do not need a fatality to focus our prevention work on any kind of injury or illness that poses a risk to wildland firefighters.
2. Work on heat illness has focused primarily on providing tools to firefighters so that they can recognize the various forms of heat illness, and educating them on ways to mitigate these.
3. Research into issues related to heat illness, along with education efforts for our work force, must always be maintained given the conditions under which firefighters typically work.

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