

A		FDID <input type="text" value="27218"/> *	State <input type="text" value="MN"/> *	Incident Date <input type="text" value="02"/> <input type="text" value="02"/> <input type="text" value="2022"/> *	Station <input type="text" value="06"/>	Incident Number <input type="text" value="22-0004855"/> *	Exposure <input type="text" value="000"/> *	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> No Activity	NFIRS -1 Basic	
B Location*		<input type="checkbox"/> Check this box to indicate that the address for this incident is provided on the Wildland Fire Census Tract Module in Section B "Alternative Location Specification". Use only for Wildland fires.								
<input checked="" type="checkbox"/> Street address		<input type="text" value="1117"/>	<input type="text" value=""/>	<input type="text" value="Marquette"/>			<input type="text" value="AVE"/>	<input type="text" value=""/>		
<input type="checkbox"/> Intersection		Number/Milepost Prefix Street or Highway				Street Type Suffix				
<input type="checkbox"/> In front of										
<input type="checkbox"/> Rear of		<input type="text" value="701"/>	<input type="text" value=""/>	<input type="text" value="MINNEAPOLIS"/>			<input type="text" value="MN"/>	<input type="text" value="55403"/>	<input type="text" value=""/>	
<input type="checkbox"/> Adjacent to		Apt./Suite/Room City				State Zip Code				
<input type="checkbox"/> Directions		Cross street or directions, as applicable								
C Incident Type *		<input type="text" value="321"/> <input type="text" value="EMS call, excluding vehicle accident with injury"/>				E1 Date & Times Midnight is 0000		E2 Shift & Alarms		
Incident Type		Check boxes if dates are the same as Alarm Date. ALARM always required				Month Day Year Hr Min Sec		Local Option		
D Aid Given or Received*		Alarm <input type="text" value="02"/> <input type="text" value="02"/> <input type="text" value="2022"/> <input type="text" value="06:49:46"/>				ARRIVAL required, unless canceled or did not arrive		<input type="text" value="B"/> <input type="text" value="01"/> <input type="text" value="106D"/>		
1 <input type="checkbox"/> Mutual aid received		Their FDID Their State		<input checked="" type="checkbox"/> Arrival <input type="text" value="02"/> <input type="text" value="02"/> <input type="text" value="2022"/> <input type="text" value="06:53:27"/>		CONTROLLED Optional, Except for wildland fires		E3 Special Studies		
2 <input type="checkbox"/> Automatic aid recv.				<input type="checkbox"/> Controlled <input type="text" value=""/>		LAST UNIT CLEARED, required except for wildland fires		Local Option		
3 <input type="checkbox"/> Mutual aid given				<input type="checkbox"/> Last Unit Cleared <input type="text" value="02"/> <input type="text" value="02"/> <input type="text" value="2022"/> <input type="text" value="07:15:55"/>				<input type="text" value="9244"/> <input type="text" value="3"/>		
4 <input type="checkbox"/> Automatic aid given		Their Incident Number						Special Study ID# Special Study Value		
5 <input type="checkbox"/> Other aid given										
N <input checked="" type="checkbox"/> None										
F Actions Taken *		G1 Resources *			G2 Estimated Dollar Losses & Values					
<input type="text" value="32"/> <input type="text" value="Provide basic life support (BLS)"/>		Check this box and skip this section if an Apparatus or Personnel form is used.			LOSSES: Required for all fires if known. Optional for non fires. None					
Primary Action Taken (1)		Apparatus Personnel			Property \$ <input type="text" value=""/> , <input type="text" value="000"/> , <input type="text" value="000"/> <input type="checkbox"/>					
<input type="text" value=""/>		Suppression <input type="text" value="0001"/> <input type="text" value="0003"/>			Contents \$ <input type="text" value=""/> , <input type="text" value="000"/> , <input type="text" value="000"/> <input type="checkbox"/>					
Additional Action Taken (2)		EMS <input type="text" value=""/>			PRE-INCIDENT VALUE: Optional					
<input type="text" value=""/>		Other <input type="text" value=""/>			Property \$ <input type="text" value=""/> , <input type="text" value="000"/> , <input type="text" value="000"/> <input type="checkbox"/>					
Additional Action Taken (3)		<input type="checkbox"/> Check box if resource counts include aid received resources.			Contents \$ <input type="text" value=""/> , <input type="text" value="000"/> , <input type="text" value="000"/> <input type="checkbox"/>					
Completed Modules		H1* Casualties <input type="checkbox"/> None			H3 Hazardous Materials Release			I Mixed Use Property		
<input type="checkbox"/> Fire-2		Deaths Injuries			N <input type="checkbox"/> None			NN <input type="checkbox"/> Not Mixed		
<input type="checkbox"/> Structure-3		Fire Service <input type="text" value=""/> <input type="text" value=""/>			1 <input type="checkbox"/> Natural Gas: slow leak, no evaluation or HazMat actions			10 <input type="checkbox"/> Assembly use		
<input type="checkbox"/> Civil Fire Cas.-4		Civilian <input type="text" value=""/> <input type="text" value=""/>			2 <input type="checkbox"/> Propane gas: <21 lb. tank (as in home BBQ grill)			20 <input type="checkbox"/> Education use		
<input type="checkbox"/> Fire Serv. Cas.-5					3 <input type="checkbox"/> Gasoline: vehicle fuel tank or portable container			33 <input type="checkbox"/> Medical use		
<input type="checkbox"/> EMS-6					4 <input type="checkbox"/> Kerosene: fuel burning equipment or portable storage			40 <input type="checkbox"/> Residential use		
<input type="checkbox"/> HazMat-7		H2 Detector			5 <input type="checkbox"/> Diesel fuel/fuel oil: vehicle fuel tank or portable			51 <input type="checkbox"/> Row of stores		
<input type="checkbox"/> Wildland Fire-8		Required for Confined Fires.			6 <input type="checkbox"/> Household solvents: home/office spill, cleanup only			53 <input type="checkbox"/> Enclosed mall		
<input checked="" type="checkbox"/> Apparatus-9		1 <input type="checkbox"/> Detector alerted occupants			7 <input type="checkbox"/> Motor oil: from engine or portable container			58 <input type="checkbox"/> Bus. & Residential		
<input checked="" type="checkbox"/> Personnel-10		2 <input type="checkbox"/> Detector did not alert them			8 <input type="checkbox"/> Paint: from paint cans totaling < 55 gallons			59 <input type="checkbox"/> Office use		
<input type="checkbox"/> Arson-11		U <input type="checkbox"/> Unknown			9 <input type="checkbox"/> Other: Special HazMat actions required or spill > 55gal., Please complete the HazMat form			60 <input type="checkbox"/> Industrial use		
J Property Use* Structures		341 <input type="checkbox"/> Clinic, clinic type infirmary			539 <input type="checkbox"/> Household goods, sales, repairs			63 <input type="checkbox"/> Military use		
131 <input type="checkbox"/> Church, place of worship		342 <input type="checkbox"/> Doctor/dentist office			579 <input type="checkbox"/> Motor vehicle/boat sales/repair			65 <input type="checkbox"/> Farm use		
161 <input type="checkbox"/> Restaurant or cafeteria		361 <input type="checkbox"/> Prison or jail, not juvenile			571 <input type="checkbox"/> Gas or service station			66 <input type="checkbox"/> Other mixed use		
162 <input type="checkbox"/> Bar/Tavern or nightclub		419 <input type="checkbox"/> 1-or 2-family dwelling			599 <input type="checkbox"/> Business office					
213 <input type="checkbox"/> Elementary school or kindergarten		429 <input checked="" type="checkbox"/> Multi-family dwelling			615 <input type="checkbox"/> Electric generating plant					
215 <input type="checkbox"/> High school or junior high		439 <input type="checkbox"/> Rooming/boarding house			629 <input type="checkbox"/> Laboratory/science lab					
241 <input type="checkbox"/> College, adult education		449 <input type="checkbox"/> Commercial hotel or motel			700 <input type="checkbox"/> Manufacturing plant					
311 <input type="checkbox"/> Care facility for the aged		459 <input type="checkbox"/> Residential, board and care			819 <input type="checkbox"/> Livestock/poultry storage (barn)					
331 <input type="checkbox"/> Hospital		464 <input type="checkbox"/> Dormitory/barracks			882 <input type="checkbox"/> Non-residential parking garage					
		519 <input type="checkbox"/> Food and beverage sales			891 <input type="checkbox"/> Warehouse					
Outside		936 <input type="checkbox"/> Vacant lot			981 <input type="checkbox"/> Construction site					
124 <input type="checkbox"/> Playground or park		938 <input type="checkbox"/> Graded/care for plot of land			984 <input type="checkbox"/> Industrial plant yard					
655 <input type="checkbox"/> Crops or orchard		946 <input type="checkbox"/> Lake, river, stream								
669 <input type="checkbox"/> Forest (timberland)		951 <input type="checkbox"/> Railroad right of way			Lookup and enter a Property Use code only if you have NOT checked a Property Use box:					
807 <input type="checkbox"/> Outdoor storage area		960 <input type="checkbox"/> Other street			Property Use <input type="text" value="429"/>					
919 <input type="checkbox"/> Dump or sanitary landfill		961 <input type="checkbox"/> Highway/divided highway			<input type="text" value="Multifamily dwelling"/>					
931 <input type="checkbox"/> Open land or field		962 <input type="checkbox"/> Residential street/driveway								

27218
FDID *

MN
State *

MM DD
2 2
Incident Date *

YYYY
2022

06
Station

22-0004855
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

E6 arrived on scene and were met by HEMS and MPD exiting the building with the patient. Crews had an unresponsive patient on the stretcher with HEMS and MPD conducting CPR en route towards the ambulance. E6 entered the ambulance and took over CPR operations as the patient was loaded for transport. E6 noted that the patient also had two gunshot wounds to the chest and one to the right wrist. One of the wounds to the chest had an occlusive dressing applied. HEMS requested that E6 continue with CPR en route to HCMC. E6 conducted chest compressions, placed an oral airway and provided oxygen therapy. HEMS placed a 12 lead ECG and MPD assisted HEMS in providing IV therapy. Crews arrived at HCMC and brought the patient to the Stabilization Room. [REDACTED]

13.384 - Medical Data

[REDACTED] HEMS confirmed that the patient was pulseless and apneic during their initial patient assessment. [REDACTED]

13.384 - Medical Data

[REDACTED] HEMS released the E6 from the scene. E6 contacted CH1 and notified them of the incident. E6 returned to service

13.384 - Medical Data