INCIDENT REPORT

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______
                      INCIDENT
_____
                Garden Grove Fire Department G1511648
Fire Department:
Incident Number:
Exposure Number:
                  0.0
Multi-Agency IC#:
Incident Date:
                  10/10/15
Dispatch Time:
                  09:58:57
Arrival Time:
                  10:02:48
Controlled Time:
Ending Time:
                  10:53:27
First-In Company:
                  GE 6
District
                  G2324
Incident Type:
                  EMS call, excluding vehicle accident with injury
Mutual Aid:
Method of Alarm:
                  E911
Type of Weather:
Air Temperature
                  81
Address, CSZ:
                  WYNDHAM HOTEL, 12021 HARBOR BL
Census Tract:
Fire Haz Sev Zone: Medium
                      RESOURCES & CASUALTIES
______
Actions Taken 1: Provide basic life support (BLS)
Actions Taken 2:
Actions Taken 3:
#Apparatus Resp Engine: 0
#Apparatus Resp Trk:
#Apparatus Resp Med:
#Apparatus Resp Oth:
                  1
Fire Svs Injury:
                  0
Fire Svs Fatal:
                  0
Non-FS Injury:
                 0
Non-FS Fatal:
_____
                      PROPERTY & STUDIES
Property Losses:
Content Losses:
Property Value:
Contents Value:
Insurance Co:
Building Ins:
Mixed Prop Use:
Property Use:
                Hotel/motel, commercial
```

Detector

TMCT	DENT	REPORT
1 131 . 1	I JP JV I	$R_{P_1}P_1$

Hazmat F	Rel:
Critical	Inc:
Special	Studies:

None

EMERGENCY MEDICAL SERVICE

Number of Patients:

Billing Care:

Status:

Transported to:

Patients Trans - Fire:

Patients Trans - Amb:

COMMENTS

**** GE6 ****

MEDICAL. FALL. 60 Y/O FEMALE PATIENT WAS EVALUATED BY GE6 PERSONNEL FOR C/C OF RIGHT FLANK PAIN FOLLOWING A MECHANICAL FALL IN HOTEL PARKING LOT. PATIENT WAS BROUGHT INTO THE HOTEL LOBBY BY WHEELCHAIR BY STAFF OF HOTEL. PATIENT WAS TRANSPORTED BLS TO UCI FOR FURTHER EVALUATION AND TREATMENT. TRANSPORTATION WAS PROVIDED BY CARE AMBUALNCE COMPANY. GE6 COMPLETE.

CAPT. RUZICKA