## INCIDENT REPORT

\_\_\_\_\_\_ INCIDENT \_\_\_\_\_\_ Fire Department: Garden Grove Fire Department Incident Number: G1600227 Exposure Number: 0.0 Multi-Agency IC#: Incident Date: 01/07/16 Dispatch Time: 06:08:55 Arrival Time: 06:17:08 Controlled Time: Ending Time: 06:23:00 First-In Company: GE5 District G2218 Incident Type: EMS call, excluding vehicle accident with injury Mutual Aid: None Method of Alarm: E911 Type of Weather: Air Temperature 47 MAGNOLIA ST / CHAPMAN AV Address, CSZ: Census Tract: Fire Haz Sev Zone: Medium RESOURCES & CASUALTIES \_\_\_\_\_\_ Actions Taken 1: Emergency medical services, other Actions Taken 2: Actions Taken 3: #Apparatus Resp Engine: 0 #Apparatus Resp Trk: 0 #Apparatus Resp Med: #Apparatus Resp Oth: 1 Fire Svs Injury: 0 Fire Svs Fatal: Non-FS Injury: Non-FS Fatal: PROPERTY & STUDIES Property Losses: Content Losses: Property Value: Contents Value: Insurance Co: Building Ins: Mixed Prop Use: Property Use: Street, other

Detector

## INCIDENT REPORT

Hazmat Rel:
Critical Inc:
Special Studies:

None

EMERGENCY MEDICAL SERVICE

Number of Patients:

Billing Care:

Status:

Transported to:

# Patients Trans - Fire:

# Patients Trans - Amb:

COMMENTS

\*\*\*\*\* GE5 \*\*\*\*\*

MEDICAL AID-FALL
PT. ASYSMPTOMATIC. PT. EVALUATED AND RELEASED AFTER REFUSING HELP. GE5
SECURED. CAPT. EDNOFF